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Religiosity, Coping and Suicidality among the Religious Zionist community of Israel

Michael Daniel Band

**Thesis submitted to University College London for the Degree
of Doctor of Philosophy, August 2006**

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Abstract

The relationship between religion and mental health has been the subject of extensive research particularly in recent years. Concurrently, the issues of coping and suicidality have also been widely studied. Significantly however, how **religious** people cope with harsh life situations and how their religiosity impacts on their coping skills is an area which seems to have been overlooked. The present study analyses how members of one cultural group, the Religious Zionist community in Israel, cope with harsh life situations. Two introductory chapters reporting on previous research relating to religion, mental health and suicide are followed by a historical and psycho-sociological review of the development of the Religious Zionist community over the last 100 years. A qualitative study (n=18) informed the quantitative research (n=124) such that questionnaires were developed through insights gained in the interviews. A synthesis of the qualitative and quantitative studies led to conclusions which have helped to refine the understanding of the relationship between religiosity, coping, and suicidality. Although the study confirms the conclusions of previous research – in general religion creates a buffer to suicidal activity – the results showed a **relatively low** impact of religiosity on coping: people who regard themselves as religious find it difficult to access their religiosity during harsh life situations. Furthermore, religiosity appears to have a greater impact on suicide acceptance than on suicide ideation. The study highlights the critical role of religious coping as a mediating factor between religiosity and suicide. The thesis suggests certain themes which help to explain the findings, for example the specific complexity of personal and collective identities which characterise the Religious Zionist community, or – more significantly - the possibility that religious coping is

not actually absent but is only available in a second, later stage of coping. As an example of a harsh life event which affected the whole community, the thesis presents a provisional analysis of the Disengagement plan of 2005, and finally the study analyses the significance of the researcher's socio-religious background and its impact on the research.

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Special recognition and thanks are expressed to my mother Mrs Daphne Band who painstakingly and patiently proof-read the text. Her natural academic ability was ever present and I felt her encouragement throughout all the years of research. I am well aware that without her, the thesis would never have reached completion.

Finally, love and heartfelt thanks to my family – my wife Dana and my children Ya'ir, Ilan, Yehudah and Na'ama. I thank them for the sacrifices that they have made over the last four years, for their encouragement and for sharing in my excitement. A special thanks to Ya'ir for the hours spent in setting up the diagrams and tables.

This thesis is dedicated to my dear father, David Band. His love of people and his warm and caring nature laid the foundation for my professional career and hence for this thesis. He passed away during the course of the research but his enthusiasm and pride in my work were essential to its completion.

Chapter One

Religion and Mental Health – An Overview

“The Torah impacts every sphere of my life, how I think, how I feel, who I am, what I am.” Interview 4

Historical Background

The relationship between religion and mental health has been the subject of heated debate and empirical research for more than a century. Although the scope of this chapter does not allow for an in-depth analysis of the relationship between the two constructs, it will attempt to highlight the major trends associated with the research in the field.

The association between religion and mental health appears to go beyond the scope of recorded history or science. Intuitively our ancestors turned to religious experiences to alleviate the pain of mental anguish. Archaeological evidence suggests that as early as the Neolithic era, ritual as a response to stress was an intrinsic element of everyday life (Patton, 1993). An example can be seen in the recent discovery in the Kilmartin Valley in Argyll, Scotland of an early Bronze Age timber circle containing an inner ring of totem poles. The circle stood on a terrace overlooking the valley and at its heart was a large hollow nearly seven metres wide and two metres deep. Traces of much earlier monuments were also found underlying the circle. One end of an early Neolithic cursus - a ritual procession monument - was uncovered at the edge of the terrace, a place with a magnificent view across the Kilmartin Valley. The massive structure, some forty five metres wide, was defined not by banks and ditches but by hundreds of close-set oak posts. By the time the

circle was built some 1,500 years later, these posts had no doubt disappeared; but the memory of the sacred importance of the site had probably survived (Denison, 2002).

Saint Augustine referred to Jesus as a healer of human souls (Thielman, 1998) and in a similar vein Bhugra (1996) suggests that as late as the fifteenth century within Christianity the priesthood was responsible for the mental well-being of its flock. In the same way people turned to Shamans when mental instability was experienced in the form of demons or evil spirits (Argyle, 2000).

Conversely religion has often provided the actual source of mental problems: Although traditionally religion and religious leaders were seen as the healers of mental problems, the Church also had a tendency to reject those who were suffering from these illnesses. On the one hand historically madness was seen as a punishment from G-d for a whole range of sins and iniquities (Neaman, 1975) and yet on the other hand the various Churches were often guilty of ignoring the plight of those suffering from mental illness (Pattison, 1988).

The present research has adopted Adams' (1995) definition of religion as a "monolithic" body of knowledge which is related to a specific form of theology or ritual and which is associated with one of the five major world religions or one of the less known minor religions. In addition Loewenthal's (1995) more refined definition of religion - as involving belief in spirituality, a divinely-based moral code, and seeing the purpose of life as increasing harmony in the world by doing good and avoiding evil - has also proved useful. Particularly relevant to the present research, Loewenthal adds that religion involves and is dependent upon social organisation for communication of these ideas.

Modest Beginnings – the first steps in psychological research

More recently the interaction between religion and mental health has been prolifically debated by the psychological community. Although much of the research has been overly simplistic and plagued with problems of design and terminology, in recent years the research has attempted to grapple with the issues with the level of complexity of research design which the subject demands. As early as 1902 William James noted that there are both healthy and unhealthy ways of being religious, and Allport (1950) remarked that the way that one is religious may have implications on one's mental health status. Such insights provided a precursor for the more recent understanding that it is not enough merely to test a correlation between religiosity and mental health: serious research must closely examine the two constructs in relation to the subjects involved in the research. An example of an attempt to engage these complex constructs is Allport & Ross's (1967) classic paradigm of intrinsic and extrinsic orientation. As will be highlighted later on in the chapter, their research suggested that religiosity and religious behaviour can be studied through the prism of motivation and that different styles of religious motivation may hold the key to understanding the huge range of religious functioning.

The complexity of the issues - together with the apparent contradictory research conclusions - serves to highlight the genuine difficulties which previous researchers have encountered.

Research complications in the field of religion and mental health

The subject of accurate and workable definitions seems to have plagued this area of research from the outset. There is no finite standard definition of mental health, just as there is no finite standard definition of mental illness. The terms contain a certain internal fluidity not only with reference to scientific or historical perspectives but

equally according to one's philosophical outlook or the theoretical school with which one identifies. In addition, there appears to be a tendency to regard religious behaviour and belief in a stereotypical way and to ignore the vast diversity of implications of, for example, religious practice between different religions or indeed between different denominations of the same faith. Levin & Chatters (1998) highlight this problem through a discussion of the relatively simplistic construct of Church attendance within the different Christian denominations. Church attendance is widely used as a standard measure of religiosity and yet the authors poignantly note that whereas weekly attendance may be normative for mainstream Catholics and Protestants, in other denominations such as Pentecostal or Lutheran Churches, more regular attendance (possibly two or three times a week) might be expected and therefore the significance of weekly attendance becomes a factor of the specific denomination concerned.

Equally challenging is to determine acceptable definitions of religiosity and an objective standard of religious belief and practice. Furthermore, even if objective definitions could be agreed upon, it is clear that religious behaviour for one individual could well be categorized as psychological instability - indicating mental illness - for his neighbour. And as Schumaker (1992) points out, there is no reason to assume that religion will relate similarly to all subcomponents of mental health.

A third area of difficulty which is relevant to the present study is the measurement of 'religiosity'. Koenig et al. (2001) refer to three types of religiosity: organizational, non-organizational and subjective. Organizational religiosity is measured by participation in planned or structured religious activities normally based around standard places of worship (Church, Synagogue or Temple) and at its lowest level is defined through Church or Synagogue membership. Although such a criterion is

commonly found in research papers, Koenig is critical of such scales because, as he explains:

“...membership means different things in different religious groups”

(Koenig et al., 2001, p.20)

Non-organizational religiosity is defined religious behaviour which is carried out in private. This can range from personal prayer, reading the Bible or other Scriptures or even listening to a religious radio programme. By definition these are religious acts which do not require interaction with other people. The third form of religiosity according to Koenig et al., subjective religiosity, is a measure of religiosity defined by self measure. It is a subjective assessment of how important religion is in an individual's life (in the present research such an assessment was an important element of the qualitative semi-structured interviews). The subjectivity of such a measure can theoretically result in a low score in both organizational and non-organizational religiosity but a high score in subjective religiosity. Loewenthal (2000) reviews the literature in this field, describing a range of methods for measuring religiosity, from the uni-dimensional measure of belief in G-d to Glock & Stark's (1965) multi-factorial approach. Suggesting that Glock & Stark's five-dimensional measure is not operational for research purposes, Loewenthal proposes a more concise, tri-factorial measure based on affiliation, identity, and belief in G-d (Loewenthal, 1995). Loewenthal goes on to highlight the complexity of measuring religiosity when working with participants from different religious groups and refers to a further measure – ‘the Religious Activity Questionnaire’ (Loewenthal & MacLeod, 1996) which is both reliable and valid for people from different religious backgrounds. The objective need for Loewenthal & MacLeod to develop this questionnaire as recently as 1996 serves to highlight the long-standing problems in

this field. The difficulties are particularly felt when the research is attempting to compare people from diverse religious backgrounds or indeed from different religions.

Inherent conflict

The fields of psychiatry and religion have traditionally embodied an inbuilt prejudice one against the other. The roots of this conflict date back to the basic controversy between science and religion, and in modern times the writings of Freud (for example see *The future of an Illusion*, 1927) have served only to fuel the debate. Although indeed the debate dates back to much earlier times, the core issues and some tension are nonetheless still relevant today. Arguably modern psychiatry has effectively provided a substitute for certain basic religious concepts. An obvious example is brought by Levine (1998) who suggests that a state of moral depravity which in the past would have been seen as a **personal** weakness or inadequacy to be dealt with or managed through **religious** channels and processes such as confession or repentance, can today be seen in terms of a **psychiatric** diagnosis which inherently places both the blame and the responsibility for treatment on **society**.

A researcher's nightmare!!

The wealth of research leaves the investigator with a paradoxical dilemma in that apparently valid, serious, empirical and clinical studies indicate both positive **and** negative correlations between religion and mental health and even provide reasonable evidence to suggest **no relationship at all!** Bergin's (1983) meta-analysis of the research relating religion to mental health showed 23% of studies indicating a negative relationship between the two constructs, 47% showing a positive

relationship and 30% showing no relationship. A more specific example of the complexity of the problem can be seen through the construct of anxiety and its correlation with religiousness. In one of the more recent meta-analysis projects, Gartner et al. (1991) found four studies reporting that religious participants were more anxious, a further three studies that found lower levels of anxiety amongst religious participants and three additional studies which suggested that no relationship at all exists between anxiety and religiosity. It is probable that some of the disparity can be traced to the specific definitions of religiosity; however the example illustrates the complexity of the research and the need for precision and care in the use of ostensibly clearly-understood constructs and terminology.

Recent attempts at research organization

As an initial point of reference it is worthwhile noting Schumaker's (1992) listing of six areas in which religion might be beneficial to mental health.

- Religion reduces anxiety because it offers cognitive structures which organize the chaos of the world.
- Religion gives hope and meaning to life which in turn leads to a sense of emotional well-being.
- Religion offers a sense of fatalism which allows better withstanding of pain and suffering.
- Religion makes sense of the problem of mortality.
- Religion offers moral guidelines which suppress self destructive elements in our life style.
- Religion promotes social cohesion.

In an early attempt to understand these processes Argyle & Beit-Hallahmi (1975) suggested that religious orthodoxy is associated with better overall adjustment for two possible reasons: 1) Orthodoxy requires a degree of personal functioning and

social participation which leads to a framework whereby 2) The group gives its members support, companionship and a sense of identity.

It is worthwhile to point out that Argyle & Beit-Hallahmi themselves noted that their conclusions tended to use general terms and that the correlatory nature of the research leaves unanswered crucial questions regarding causation. Their research integrity they laid the path for ensuing more precise and more clearly defined studies.

Modern research supporting old ideas

Recent research, often focusing on specific areas within the general topic, has tended to replicate earlier findings. One example is Chang et al. (2001) who established a buffering effect of religion on depression for women who reported experiencing sexual assaults whilst in the army. The research showed that women veterans who reported experiencing sexual assaults had lower mental health scores and higher levels of depression than a control group of female veterans who had not been sexually assaulted. Linear regression analysis indicated that these negative impacts diminished with increased frequency of religious service attendance, reminiscent of Durkheim's buffering effect of organizational religiosity on mental health and depression.

Another example is Plante & Sharma (2001) who reviewed recent research concerning the relationship between religious faith and mental health. Specifically the authors looked at the areas of well-being, depression, anxiety, substance abuse, and schizophrenia, suggesting a positive impact of religion and spirituality on these areas. In addition they reviewed recent research on religious faith and personality disorders, eating disorders, somatoform disorders, and bipolar disorder, each time arriving at similar conclusions.

Heilman & Witztum (2000) examined the relationship between religion and mental health through a somewhat novel approach. The research investigated individuals for whom religion is at the heart of their cultural and personal life, revealing how they address problems arising from mental illness through their religious faith and practice. The authors describe three case studies from the Ultra-Orthodox Jewish community in Israel suggesting that the religious faith of the participants provided them with a frame of reference through which their disorder could be understood. This frame of reference offered some sort of meaning to their predicament, thus allowing the patients and their families to cope with debilitation and acute changes in lifestyle. In addition the study suggested that the religious practices surrounding the illness offered the patients a way of destigmatizing their condition and redefining it in acceptable religious or spiritual terms. This in turn made the therapy and treatment personally and culturally more acceptable.

Weaver et al. (1996) concluded that specifically with reference to the role of religion in traumatic situations, personal faith and religious communities are central to the coping process. Research carried out in the aftermath of recent examples of mass trauma such as Hurricane Hugo in America has shown similar results (Weinrich et al, 1996). Davis et al. (1998) showed that also on an individual level (the mourning process after the death of a family member or close friend) religious belief and practise are positively associated with affirmative psychological adjustment.

The other side of the coin

Although the bulk of research appears to support religion's positive effect on mental health, many psychologists have been more wary of sweeping generalizations. Indeed, Freud himself constructed a model which saw religion as a relatively

primitive defence mechanism. In 'The Future of an Illusion' (1927) he condescendingly refers to religion as "the universal neurosis" which spares us "the task of forming a personal neurosis". The book develops the idea that religion is rooted in the infant's relationship with his parents, explaining that it is the product of a primitive projection of parental figures and conscience which conveniently helps us to cope with suffering and helplessness. Other studies have also noted the possibility of a negative relationship between religion and mental health. Spiro (1965) somewhat scathingly described religion as an expression of mental illness raising the possibility that religious activity should be seen as abnormal or pathological behaviour requiring not socio-cultural analysis but psychiatric treatment. He went on to describe religious belief as a cognitive distortion in which logically unfounded beliefs are entertained as true. In a similar vein Ellis (1980 p.636) suggested that the **less** religious people are, the **more** emotionally healthy they will be, and in 1986 developed his ideas to conclude that "...religiosity is, on almost every conceivable count, opposed to the normal goals of mental health."

Although most would regard both Spiro's and Ellis's statements as somewhat extreme - if interesting in their perspective - it is not untenable to suggest areas where religious belief and behaviour can potentially have a detrimental effect on mental health.

A further confusing issue is raised by Wulff (1991). In his classic work on the psychology of religion he highlights the fact that many people who are troubled by anxiety and guilt (traditionally the cornerstones of psychological conflict) are intuitively drawn to a construct which promises absolution, love and moral sustenance. This attraction to religion as a response to psychological problems should, according to Wulff, not be confused with the religious person who utilizes or exploits his belief when trying to come to terms with a harsh life situation.

In addition to the six areas which Schumaker's (1992) shows religion to be beneficial to mental health (see above), he suggested five areas which could be seen as being problematic:

- Religion leads to unhealthy levels of guilt.
- Religion reduces self-esteem and increases self-denigration.
- Religion promotes an unhealthy repression of anger.
- Religion creates anxiety over punishment.
- Religion leads to a constricting of personal growth.

A case in point ...

An example of religion's potentially problematic effect on mental health can be seen in the experiences of individuals who have undergone a strengthening of their religious faith. The traditional viewpoint as supported by Bergin (1983) was that such a religious transformation is a positive experience. Recently however, the area has been re-examined and the traditional conclusions have been challenged. Greenberg & Witztum (2001) investigated seventy-one *Ba'alei Teshuva* (Jews who have grown up in a secular environment and have chosen to become Orthodox) who attended a public mental health clinic in a suburb of Jerusalem in Israel. Their data indicates that mental illness is more common amongst this section of the population and significantly the authors suggest that although initially a strengthening of religious faith and commitment might appear to bring tranquillity and stability, with time pathological symptoms tend to return, and the religious beliefs and practices do not effect a long term buffer.

Although the various studies leave a somewhat inconclusive picture Hathaway (2003) warns against disqualifying the significance of religious functioning simply because the research is equivocal. He cites examples of other basic areas of functioning which are specifically included in D.S.M. but which also show inconsistent relationships with mental health:

“.... not all work is health enhancing. A person’s occupational functioning may be a substantial stressor contributing to problems such as health risk or negative mood. Similarly not all social functioning is health enhancing. Social relationships may contribute to stress and foster unhealthy patterns of support.” (p.117)

Religion and mental health – methodological potholes

In addition to the problems resulting from the specific subjects, it seems that the field also suffers from serious methodological difficulties. Lea (1982) explained that almost all of the research in this field is correlational in nature leading to a lack of clarity regarding causation. Furthermore, there exists an acute problem of sampling: the majority of participants are either groups of relatively homogenous college students, Church members or other groups who would not be considered to be suffering from a clinical disorder. The findings from these studies might be useful in furthering an understanding of mental health but are limited in what they can add to our knowledge of mental illness. Lea continued that there is a serious problem in the setting up of control groups - studies tended not to control for gender, age, socioeconomic status or ethnic background. Although here too there is a tendency to over-generalization, it seems that the problems which Lea has highlighted are indeed widespread. Gartner et al. (1991) discussing discrepancies in the research, noted that most studies which show a negative relationship between religion and mental health employed “soft” measures of mental health status (paper and pencil tests) whereas

studies concluding a positive relationship employed “hard” variables such as suicide rates or admission to a mental hospital. Such random correlations clearly raise concerns over the validity of such studies and critical questions concerning their methodology.

Although recent studies have tried to engage the issues of methodology and clarity of term-definition, it would appear that the field is still beleaguered with these stumbling blocks: Shkolnik et al. (2001) examined the factors that make for “successful ageing.” In particular, the authors examined the relationship between the *degree of religious or traditional observance on overall life satisfaction, health, function, and activity* of an elderly population. The participants were Israelis from 68 to 75 years old and were divided into two groups: 37% were traditional (adhering to the basic tenets of Judaism but without complete observance of the commandments) and 67% were religious. Overall the socio-demographic features of both groups were similar. An important research question was addressed and apparently interesting results were presented suggesting that the religiously observant elderly person, who is religiously active, retains a social status that earns him or her respect because of this activity. Such a social status can, according to the authors, even provide a source of power in social groups, as a result of which the individual will function more effectively and is more satisfied with life. Notwithstanding the insights that might be gleaned from the results of such a study, one is bound to note the critical absence of a clearly-defined control group. Such basic design flaws must presumably raise questions regarding both validity and reliability.

Methodological advances

As has been noted, in a classic and early attempt to overcome some of these methodological issues, Allport & Ross (1967) established a paradigm through which to study religiosity and religious behaviour. The authors highlighted the issue of motivation as the critical factor in religious functioning, suggesting a differentiation between intrinsic and extrinsic orientation. Intrinsic orientation was defined as a sincere commitment which acts as a guiding motivation in a person's life. G-d is seen as being gracious and kind and death is seen in generally positive terms, often associated with the reward of the world to come. Extrinsic orientation, on the other hand, sees religion as a means to an end and not the end itself. Here G-d is perceived as being revengeful and death is seen in negative terms of pain and loneliness. Religion will help those with extrinsic orientation on their path to status, security, self-justification, and self-worth as well as with a whole host of other legitimate gratifications, whereas the intrinsically orientated individual will be guided by internalized motivation of, perhaps, a more purist nature.

As a result of this understanding Allport developed the Religious Orientation Scale (R.O.S.) which by 1985 had, according to Donahue (1985), provided the base line for some seventy empirical studies. Baker & Gorsuch (1982) for example, found a negative correlation between *intrinsic scores* and *anxiety* and a positive correlation between *extrinsic scores* and *anxiety*. Watson et al. (1988) carried out several studies centred on depression scales and R.O.S. Their results indicated that intrinsic religiousness correlates negatively with depression scales whereas extrinsic religious motivation correlates positively with the same scales. In general intrinsic religious orientation is positively correlated with well-being and extrinsic orientation is negatively correlated with well-being (James & Wells, 2004). Spilka & Mullin

(1977) interpret Allport's classic dual classification in cognitive terms whereby intrinsic religiosity is associated with **perceiving** G-d as kindly, generous and loving figure. In such a cognitive structure, death, for example, could be seen in a positive light (a stepping stone, perhaps, to the rewards of the world to come). Extrinsic religiosity would, on the other hand foster a negative image of G-d as being distant and unattainable. Death would likely be construed as a painful, lonely punishment.

Allport & Ross's intrinsic-extrinsic paradigm was further developed by Batson & Ventis (1982) who adopted the term "quest" to describe a more general religious orientation - if slightly less emphatic than Allport's original intrinsic type. The authors described the quest orientation as a more mellowed type of religiosity which could cope with questioning and uncertainty whilst embracing the essential religious framework.

Although there is much discussion concerning the relevance and suitability of these constructs it is worthwhile to note that even the most recent studies have found them a useful springboard to the discussion. An example can be found in a recent doctoral thesis by Alexander Kimberly (2001). Kimberley researched the relationship between *religious orientation* and *well-being* using the 1998 General Social Survey, employing the by now classic paradigms of extrinsic, intrinsic and quest orientations. Analysis of the data indicates that there was a slight negative association between *quest* and general *well-being* but a strong positive association between *quest* and *inner peace*. The significance of the research, however, is not only in its empirical results but also in its methodology and the constructs which the author employs to carry out his research.

James & Wells (2004) summarise that in most studies intrinsic orientation is correlated with absence of illness, freedom from worry and guilt and general

psychological well-being, and extrinsic orientation is negatively correlated with freedom from worry, personal competence and flexibility.

In spite of the objective methodological and research design difficulties which confront researchers in this field, more and more recent studies have attempted to delve beyond the simplistic definitions and generalizations. They have refined the research questions and have produced research designs which strive to specifically focus on the intricate and delicate issues under discussion. Following in Allport & Ross's wake, scholars have acknowledged the need to define the constructs with greater precision and clarity whilst also limiting the scope of the research in relation to both the subject population and the particular variables under discussion.

The need for an 'upgrading' of the research designs was empirically identified as early as 1982 by Batson & Ventis. In a simple yet critically analytical study they demonstrated that the relationship between religion and mental health is dynamic in that it is a function of the definition of mental health. If mental health is defined in negative terms – as a lack of symptoms - then religion does indeed appear to have a statistically positive impact. The opposite is true however, when mental health is defined according to competence or self-control or by a number of other positive attributes such as self-actualization, open-mindedness or flexibility. Once again, even though one could challenge the studies empirical results, there is no doubting the importance in the development of the authors' understanding of the complexity of the relationship between religion and mental health, and specifically their awareness of the need for precision when defining the central elements of the research.

Payne et al. (1991) chose to disregard the terminology of mental health altogether. Their research concentrated on determining which specific psycho-social functions were positively affected by religiosity and which were affected negatively. Here mental health seems to be treated anachronistically, not because of some ideological

or philosophical agenda but simply because the term is so wide and all encompassing that it reduces the effectiveness of associated research. Similarly Gartner et al. (1991) listed suicide risk, drug usage, alcohol abuse, delinquency, divorce and depression as having a positive association with religiosity and authoritarianism, and self-actualization as showing a negative relationship. Here it interesting to note that anxiety, self-esteem and psychosis all give mixed results, possibly indicating that these specific variables are too complex in themselves to be directly and singularly correlated with religiosity.

Using a slightly different approach Jensen & Bergin (1988) tried to assess the values that professional therapists hold as being important for mental health. Although the impetus for such a study is another indication as to the lack of clarity regarding the terminology in the field, the results did offer cause for a degree of hesitant optimism. The research examined a national sample of 425 mental health professionals who largely agreed that the following functions are important for mental health: competent perception and expression of feelings; freedom, autonomy and responsibility; integration and coping abilities; self-maintenance and physical fitness; self-awareness and personal growth; human relatedness and interpersonal commitment; mature frame of orientation and forgiveness. Although the research does not serve to create a comprehensive definition of mental health it is important to be aware that there is some level of acquiescence. Unfortunately one of the few areas where the level of agreement was low was around the theme of religiosity/spirituality. Here it would appear that the professional therapists found it hard to agree as to the relevance of religion in the wider picture of mental health.

The research on coping has notably highlighted the importance of *religious identity* as a key factor in *coping ability* (Pargament & Brant, 1998). Loewenthal (2000) reports on Ganzevoort's (1998) development of Pargament's religious coping

paradigm which holds salient the four functions of **identity**, context, crisis, and coping.

In recent years, specifically the area of religious coping has seen increased interest. Notably the work extensive work of Pargament and his associates has led to a wider grasp of this field (see in particular Pargament, (1996); Pargament, (1997); Pargament & Brant, (1998) and Pargament, Koenig & Perez (2000).

Refining the definitions

In the footsteps of Allport & Ross, some researchers have also attempted to refine enduring definitions of religious behaviour, religiosity and spirituality, thus enabling a higher level of precision in the research.

Dein (2005) emphasises that research in this field often confuses between religion and spirituality and he suggests that although in recent years especially in cultural and cross-cultural studies spirituality has become more centre-stage, the lack of 'conceptual clarification' has led to much confusion.

DeFigueirido & Lemkan (1978) used a construct of public and private religious practices suggesting that somatic manifestations of anxiety were negatively associated with public religious participation but positively associated with non-public religious affiliation. Similarly Larson et al. (1989) looked at the correlation between *regularity of Church visits* and *blood pressure*. Although the attempt to break down terms such as religiosity into quantifiable and workable constructs is clearly laudable, it would appear that in this instance the authors fumbled into a similarly dangerous trap in their crucial assumption that those who regularly attend Church are religious and that lower Church attendance is a sign of attaching little importance to religion.

In a milestone study Chamberlain & Zika (1995) looked at the relationship between *religiosity*, *meaning in life* and *psychological well-being*. General research has supported the presumption that *meaning in life* is positively associated with *psychological well-being* and vice-versa, and in addition it is clear that both variables are closely related to religion. The constructs to which the authors refer have conceptual importance and it is worthwhile, therefore, to consider how these concepts have been understood. Witter et al. (1985) measured *well-being* in terms of life satisfaction, morale, quality of life and happiness. More recent studies such as research by Chamberlain (1988) have employed the cognitively based construct of *life satisfaction* together with the affectively based constructs of positive and negative affect. Several researchers have tried to suggest a measure for *meaning to life*. Battista & Almond (1973) created a model comprising four separate measures: religious, existential, humanistic, and self-transcendent. Reker & Wong (1988) built a similar model but included thirteen separate scales. Significantly, all of the measures include religion as an integral element – a notion which was confirmed by a factor analysis study of all the measures of *meaning to life* carried out by Chamberlain & Zika (1988).

Four years later in their seminal study, Chamberlain & Zika (1992) acknowledge that *meaning to life* can be derived from sources other than religion and therefore they chose to look at the relationship between *religiosity* and *psychological well-being* when *meaning to life* was already taken into account. One such study looked at mothers at home caring for young children and elderly people. These two groups were considered to be of high risk regarding *well-being* due to their isolation, lack of paid employment and frequent lack of financial resources. The groups are particularly advantageous in that there is no obvious, predictable correlation between either of the groups and *religiosity*. The results suggest that whereas *meaning to life*

is significantly correlated with *well-being* for both groups, *religiosity* has only a low level of correlation with *life satisfaction* for the young mothers, and a moderate correlation with *life satisfaction* and *positive affect* for the elderly. *Negative affect* showed no correlation with *religiosity* in **any** of the groups and this critical result suggests that whereas religion might have a positive impact on mental health, the relationship is not necessarily reciprocal and that mental health is not limited to positive levels of religiosity. It is worthwhile to note that even in an impressive study such as this, religiosity was defined by a single measure – arguably limiting the significance of the results.

When Chamberlain & Zika looked at *religiosity* and *well-being* whilst controlling for *meaning to life*, the uniformity of the results was surprising. *Meaning to life* correlated significantly with *well-being* but *religiosity* contributed almost nothing. The implication is that the traditional correlation between *well-being* and *religiosity* is significantly downgraded when *meaning to life* is controlled for; hence it would appear that the relationship between *religiosity* and *well-being* is mediated by *meaning to life*!

Narrowing the goalposts

Within the broad field of religion and mental health certain authors have narrowed their research to specific areas in order to avoid certain methodological pitfalls whilst gaining a greater level of precision and relevance from their results. An example of this is the area of religion and substance abuse and addiction. Research reviews such as Gorsuch & Butler (1976) and Donahue (1987) highlighted a broad negative relationship between religion and substance abuse. This general picture has also been corroborated in more recent research.

A recurring methodological problem is that religiosity and religious behaviour tend to be correlated with a large number of social and demographic factors such as age, gender, geographic location, and family and peer factors. Regarding substance abuse, some studies have employed statistical techniques such as discriminant function analysis and regression analysis in an attempt to verify the effect of religiosity on substance abuse and addiction whilst taking these covariates into consideration: Benson & Donahue (1989) controlled for *region, school, gender, race, father's presence, parental education* and *maternal employment*. Cochran et al. (1988) controlled for *geographical region, schooling* and *family income*. Both studies corroborated the negative relationship between *substance abuse* and *religiosity* after the covariates were controlled. Once again however, the significance of the research is not only in the important results but equally in the authors' understanding of the complexity of the constructs and their attempt to engage the complexity as opposed to ignoring it.

Another example is Greenberg & Witztum's (2001) study of Obsessive Compulsive Disorder in the Ultra-Orthodox Jewish community of Jerusalem. Amongst all of the psychiatric diagnostic categories, O.C.D. might be seen as being eminently suited to a religious framework. Those religions or religious denominations for whom ritual is significant are fertile ground for the development of obsessive thought patterns and/or compulsive behaviour. The central dilemmas of Greenberg & Witztum's study were whether religious ritual induced O.C.D., and whether the existence of seemingly obsessive compulsive ritual encouraged the development of the disorder. The results of the research indicated that the obsessive-compulsive behaviour amongst the Ultra-Orthodox sufferers of O.C.D. is limited to four very specific areas which are not dissimilar from the obsessive/compulsive traits in secular sufferers.

From this the authors assert that Judaism and religious behaviour are not themselves pathogenic – they do not cause or create O.C.D. - but they provide a setting in which the obsessive compulsive behaviour can develop. The authors suggest that despite the religious form and content of many of the symptoms, they are in fact typical of O.C.D. symptoms in all cultures. An example is *orderliness* which has been highlighted in the literature as a cross-cultural area of concern for O.C.D. sufferers. The Jewish Ultra-Orthodox sample investigated by Greenberg & Witztum presented this area as one of concern but under the guise of precision of prayer activities and the saying of the prayers with the appropriate levels of concentration. They conclude that the religious symptoms of O.C.D. are not unique to this group but merely represent the form that the disorder takes in patients for whom religious beliefs and practices predominate. Furthermore they categorically state that there is no evidence that religious settings encourage the development of the symptoms.

Prediction and prevention

It should be noted that if one of the central aims of empirical research in this field is to develop programmes which are oriented towards prevention, then it is important to determine which factor or construct most effectively predicts the desired or undesired behaviour. Once this factor is identified it should be integrated in the development of any prevention programme. If it could be shown that eating apples and oranges both help to prevent tooth decay but that apple eating is statistically more significant, then clearly available resources should be directed to programmes which educate and encourage apple eating. The example is simplistic and the parallel to substance abuse - or indeed other mental health issues such as suicide - is incomplete, however it would seem that the principle is applicable.

Religiosity appears to be a superior predictor of substance abuse and addiction when compared to certain psychological and social variables, but is inferior to others predictors. Extensive studies by Benson (1990) and Benson et al. (1986) indicate that whereas *religious variables* are more efficient predictors than factors relating to *self-esteem*, *self reported academic ability* or *community volunteering work*, factors relating to *parental control* and *peer encouragement* seem to be **more** proficient predictors of substance abuse. The research is not totally conclusive but the direction seems clear, and one would therefore hope that these conclusions are fully considered in the development of the various prevention programmes.

Thinking out of the box

An interesting attempt to gain a greater understanding and to elude some of the methodological problems has been John Schumaker's (1992) paradoxical approach. Instead of the classical negative correlation between mental health and religion, Schumaker developed a construct of *irreligion*, and considered the positive correlation between this construct and mental health. Although here too a precise definition of the terminology is not easy, defining a lack of belief or a lack of religious practice or even a lack of spirituality is easier than attempting to plot and define the borders from a positive angle. Much earlier (1969) Demerath had conceptualized irreligion as implying an aggressive rejection of religion, and Campbell (1971) had referred to a status of either hostility to religion or simply indifference to it. Schumaker (1992), leaning in the direction of Campbell, has loosely yet functionally defined irreligion as an extremely low level of religious belief and involvement. He notes that there is a distinct lack of research in the area of irreligion which might be partially explained by the problems encountered when

trying to build reasonably-sized sample groups. Whereas religious people or people involved in religious activity are by definition found in accessible homogenous groups such as churches, synagogues, youth groups, prayer groups etc., irreligious people are by definition, unlinked to any one specific group – there is no ‘Church of the Non-Believer’!

A further attempt at delineating the religiosity variable was attempted by Crawford et al. (1989). They developed a religious intensity construct suggesting that *low religious intensity* participants had significantly greater symptoms of mental disturbance than *high religious intensity* participants. Using a twenty-two item screening of psychological symptoms, they showed that the *low religious intensity* group had a mean score (M=3.85) which was double that of the *high religious intensity* group (M=2.08). Schumaker (1987) using the same scale showed similar results.

In 1971 Stark assessed the degree of religiosity of a group of outpatients in a mental health clinic together with a well-planned control group. He divided the groups into levels of religious commitment including a level of participants who stated that religion was “not important at all”. Stark’s results showed that there were four times as many out-patients as controls in the irreligious category. It is not clear if Stark’s research was intended to deal with the specific group of *irreligious*; however the results of his research clearly led him in this direction.

Again, although the results of such studies are clearly significant and add their own contribution to the wealth of research, the significance is also in the authors’ ability to tackle the research questions from an innovative angle, thus reducing the complications and complexities tendered by more standard research designs.

The last decade has seen an important increase in the use of qualitative research techniques in both psychology and sociology and specifically in the field of religion and mental health. Elliot (1995) suggested that qualitative research particularly lends itself to the understanding of participants' perspectives and to developing theory from field work as opposed to laboratory-based studies. It seems quite natural, therefore, that the relationship between religion and mental health should be observed and assessed using such skills. An important and classic example of the employment of such techniques is Cinnirella & Loewenthal's (1999) study of ethnic influences on beliefs about mental illness which used solely qualitative techniques to research this sensitive field specifically using semi-structured interviews and thematic qualitative analysis.

Not *if* but *how*

Notwithstanding these recent research developments, the majority of studies on religion and mental health are centred on the correlation between the two variables. The research is empirical and tends to quantify the relationship and remark on the strength or weakness of the correlation. Certain authors have attempted to go one stage further and explain **how** the generally accepted positive influence of religion on mental health might be operating. Peterson & Roy (1985) suggested that religion provides an all-encompassing interpreting scheme which allows an individual to make sense of his existence. Pollner (1989) developing this idea, suggested three directions for understanding the statistical trend:

- Religion helps to explain and resolve crises.
- Religion encourages a feeling of self-empowerment and control.
- Religion provides a sense of meaning, purpose and personal identity.

•
This attempt at explaining the statistical results seems to be relatively underdeveloped. Perhaps authors are wary of delving into the complexities of **how** belief and faith affect us and are more comfortable in agreeing that they do. However, if these constructs are indeed critically affecting our lives and can therefore be utilized to develop preventive measures for adverse behaviour, then a greater understanding of the processes is required: the **what** seems to be relatively conclusive but the **why** and **how** clearly require further understanding.

Conclusion

Although religion generally appears to have a positive effect on mental health it also seems probable that as Roberts suggested as early as 1953, religion has the potential to be both health giving and beneficial, inhibitory and pathological. The implication is that it is a covariant which serves to enhance and develop psychological situations which are already present, or in Roberts's terms – religion is an amplifier.

Pargament & Brant (1998) conclude their paper on religion and coping by reiterating Roberts's assertion and by calling for a move to a micro-analytical research approach whereby vital attention is paid to the type or method of religiosity, the sample, the situation, and the time frame. In addition they highlight the absence of longitudinal studies which are critical for any serious assessment of the effect of religious coping on mental health.

Despite the profusion of research, the area seems to be plagued with methodological difficulties, generalizations which lead to confusion, and research designs which limit the value of the results. The difficulties might be representing a counter-transferential effect, in which the authors' own questioning and searching

surrounding these life-issues are mirrored by lack of clarity and problematic methodology which is seen in much of the research. Furthermore, it is possible that the religious persuasion and background of the authors as well as their levels of religiosity, belief and practice could also be affecting the research. These considerations are conspicuous by their absence from the research reports and it is an area which should perhaps be investigated further.

In reference to the present study the lessons are clear: there is a basic imperative for optimum clarity of definition as well as a need to go beyond the question of **if** a participant is religious and to attempt to verify **how** he/she is religious and how the specific aspects of his/her religiosity are affecting his/her life. Two key lessons must be learnt from this chapter. The first is the direction pioneered by Allport & Ross (1967). Their research highlighted the need to delineate the religiosity variable into more manageable categories. In the present research, their three-way split (including the quest variable) has been further enhanced to provide an even greater degree of accuracy and precision when attempting to understand the affect of religiosity on coping strategies. The second lesson is stressed by the studies of researchers such as Benson & Donahue (1989). The innovation of their research was on the one hand to choose a limited and specific population and on the other statistically to control independent variables which are not absolutely related to the study – for example gender or age.

In choosing the Religious Zionist community in Israel this study has focused on a very specific population group. Whilst acknowledging general influences which are affecting the community, the study tried to verify the explicit effect of religiosity on individuals' ability to cope with harsh life situations.

Chapter Two

Suicide and Religion

“A religious person always views suicide differently.” Interview 2

Introduction

This chapter will review the literature which links suicide with the various topics connected with religion. The chapter employs systematic review methodology including tabular representations of the central elements of the research.

Systematic review methodology involves a search strategy which streamlines the enquiry and analysis and tabular representation of material enabling quick referencing and comparison. The search strategy was based on guidelines set out by the U.K. Cochrane Centre National Health Service Research & Development Programme (Chalmers & Haynes, 1994, Eysenck, 1994) and by the York University National Health Service Centre for Reviews and Dissemination (1996).

The central subject of the review was defined as **the relationship between religion and suicide**.

Two clusters of search terms were used (where applicable, the suffix * followed a shortened form of words such as religious, religiosity, religion). When such notation was not relevant the full word was spelled out such as **belief**.

Cluster 1 (religion)

Relig*

Belief

Creed

Cluster 2 (suicide)

Suic*

Mental*

For electronic databases of articles, books, theses and thesis abstracts, three groups of results were formed: one group of results for each cluster and a third group representing material which included at least one search term from both clusters. e.g. relig* suic* and mental*.

Sources searched

Electronic databases of published articles: Medline, ERIC, Psych Info and WOS (Social Science).

Electronic databases of published books: Psych Info and WOS (Social Science).

Libertas, Amazon, Blackwell.

Durkheim – historical background

The traditional research linking religion with suicide is anchored in the seminal work of Emile Durkheim, specifically in his central treatise ‘Le Suicide’ (1897).

In general, Durkheim proposed four different types of suicide, based on the degrees of imbalance of two social forces: *social integration* - the degree to which collective sentiments are shared, and *moral regulation* - the degree of external constraint on people (Ritzer, 1992).

Egoistic suicide was the result of too little social integration. People who were not sufficiently associated with social groups (and therefore well-defined values, traditions, norms, and goals) were left with little social support or guidance, and were at a higher risk of committing suicide. Durkheim’s prime example was the socially defined group of “unmarried males”, who, with less to bind and connect them to

stable social norms and goals, committed suicide at higher rates than their married compatriots.

Altruistic suicide, on the other hand was a result of too much integration. Here self-sacrifice was the defining trait. Individuals became so integrated into social groups that they lost sight of their own individuality and became willing to sacrifice themselves to the group's interests. Durkheim cited soldiers as being prime examples of this group.

Anomic suicide represented an imbalance of means and needs, where specifically an individual's means were unable to fulfil his needs. Durkheim divided this group into four separate categories: acute and chronic economic anomie, and acute and chronic domestic anomie.

Fatalistic suicide was, according to Durkheim a rare occurrence related to the overregulated, unrewarding lives of groups such as slaves, childless married women, and young husbands.

Regarding the issue of suicide and religion, Durkheim emphasized an inverse relationship between suicidal tendencies and religious orientation. He maintained that religion provides a buffer against suicidal behaviour due to its framework of shared values, intense interaction and strong social bonds.

Durkheim's theory was based on a concept of religious integration whereby the individual's needs are secondary to those of the community. This subordination, according to Durkheim, furnishes the individual with a sense of purpose which tends to encourage communal responsibility rather than preoccupation with individualistic personal worries and concerns (Durkheim, 1897). The religious community creates a society in which "the culture of collectivism predominates over that of individualism" (Stack, 1985 p.432). He argued that the issues of social organization

and collective life were critical in explaining differences in suicide rates. The most apt example of this was the lower rate of suicide which he found in the Catholic as opposed to the Protestant church. Catholicism, he argued, is a more highly integrated religion than Protestantism, and it is in this that the difference in suicide rates is expressed. It was not the religious doctrines themselves but the different social organization of the two religions.

Durkheim - expanded, developed and criticized.

Almost one hundred years after Durkheim published his initial findings, Steven Stack, possibly the most pre-eminent and prolific modern-day researcher in the field of suicide and religion, has attempted to refine and develop Durkheim's basic premise. Stack (1983) argued that the positive aspects of religion may be acting to reduce suicide ideation specifically in depressed and hopeless participants or in participants who find themselves in subjectively hopeless situations. Under such conditions, religious penance or an acceptance that events are part of a greater, divine plan, might, according to Stack, succeed in affording meaning to harsh experiences or suffering.

A distinct problem here is the notable lack of research. Weaver et al. (2003) showed that of all the articles published in the 'Journal of Traumatic Stress' in the 1990s, only 4.7% dealt in some way with religion or spirituality. Ebaugh et al. (1984) noted that researchers have shied away from dealing with how religiosity affects the response to harsh life situations:

“One glaring lacuna in the literature is the influence of different religious ideologies on the perception of stressful events and reactions to stress or crisis.”

(Ebaugh et al., 1984, p.20)

Ebaugh's study is important not only with regard to the results concerning the Bahai religion (see below) but in the framework of the study itself which is almost a lighthouse in a sea of unresearched waters.

Gouldner (1975) suggested that religion can offer an alternative to society's materialistic or paternalistic merit system. According to Gouldner, for the religious, it is moral values and not materialism which give status and rank; happiness is not a function of wealth or good luck but more the results of humility and modesty.

Other studies have also tried to delve beyond Durkheim's initial and possibly simplistic inverse correlation. Ellis & Smith (1991), for example, acknowledged that strong religious beliefs are closely related to adaptive cognitive beliefs for not committing suicide i.e. there is a high positive relationship between an individual's religious well-being and his moral objection to suicide. White (1989), on the other hand, observed that since so many religious doctrines highlight the negative consequences of suicide – both in this world and the next - it may be that a fear of these consequences is serving as a deterrent to suicide behaviour in general and suicide ideation in particular.

One of the key stumbling blocks in this area is the difficulty in refining a workable definition of religion. Loewenthal & Cinnirella (2000) discuss this problem of defining the construct of religion and, based on Loewenthal (1995) they suggest a tripartite definition comprising a belief in spirituality, a divinely-based moral code, and a view of life's aim as increasing harmony in the world by doing good and avoiding evil. For the purposes of research they suggest a more practical delineation based on the four measures of affiliation, self-definition (as religious), practice

(attendance, prayer and other activities), and belief. This definition has proved useful in the present research.

In recent years the traditional Durkheimian viewpoint has not only been developed and expanded but also criticized. Researchers have begun to raise the possibility that it is not religion itself which functions as a defence against suicidal inclinations, but specific elements which are functions of religion and religious behaviour. Included here are factors which are **directly related** to religion such as religiosity (for example see Johnson et al, 1980), or conversely factors which are **not necessarily directly related** to religion such as social support or a feeling of communal belonging (see for example Pescosolido & Georgianna 1989; Stack & Wasserman 1992). Several of these post-Durkheimian researchers have suggested that religion encourages a process of social networking which tends to increase the level of social support and thus reduce the suicide potential. The understanding here is that it is not the intrinsic opposition of the various religious doctrines which act to reduce the risk of suicide, but the human support network which is almost a by-product of most religious lifestyles. The advocates of the social networking theory have tended to emphasise that the combination of strong religious belief together with active participation in a religious communal life could well be associated with a decreased suicidal risk (see for example, Klagsburn (1977), Seiden (1969), and Stengel (1975)). A further theoretical development to Durkheim's basic conjecture is the *religious commitment thesis* whereby the protective buffer is in fact dependent on the belief in a few related basic convictions, such as life after death and reward and punishment (Stack, 1991). This viewpoint has also been termed the cognitive dissonance model in reference to Leon Festinger's (1957) Theory of Cognitive Dissonance whereby contradicting cognitions serve as a driving force that compels the mind to acquire or

invent new thoughts or beliefs or to modify existing beliefs so as to reduce the amount of dissonance or conflict between the two cognitions. In the case of the *religious commitment theory* the researchers argue that a robust belief in life after death or in spiritual reward and punishment contradicts the concept of suicide and therefore acts as a buffer to suicidal ideation and acceptance. The supporters of the *religious commitment thesis* suggest that commitment to such a set of personal religious beliefs is more significant in the lowering of suicide statistics than the social integration which is often reinforced by a religious lifestyle.

As with many long-standing, widely-held convictions, the traditional Durkheimian viewpoint has not only been refined and developed, but challenged almost to the point of non-recognition. A notable example is Stack's (1991) suggestion that religious affiliation negatively affects suicide ideation (reduces the prevalence) because of Church attendance - not, as had been previously assumed, because Church attendance is a measure of religiosity but because the attendance itself acts as a buffer, not its significance in terms of religiosity!! Indeed, Stack comments that:

“the weight of evidence indicates that religion has little if any influence on suicide in today's highly secularized society.”
(Stack, 1982, p.59)

Explanations are varied, but Stack has suggested that in contrast to the time when Durkheim was writing, today's society is more secular and as a result religion has lost some of its hold on the individual.

Notwithstanding this somewhat extreme view, recent studies - such as Pescosolido & Georgianna (1989) or Breault (1986) – which often focus specifically on adolescents, have once again tended to verify some sort of correlation between the two central variables of religion and suicide and although it would appear that Durkheim's initial, somewhat rudimentary theory is no longer totally tenable, it is equally

unreasonable to disregard entirely any relationship between the two constructs. In addition, it should be noted that specific research in this field is sparse and that questions remain regarding the precise processes that are at work.

Table 2.1 highlights research which has attempted to advance, develop and even supersede the original Durkheimian axis linking religion with suicide. The table also highlights conceptual developments in the research field.

Table 2.1: Research relating to Durkheim's original treatise on suicide

Study Source	Country	Source and type of information	Findings and conclusions
Breault (1988)	U.S.A.	Durkheim's hypotheses regarding religious and family integration are tested with new and reliable church membership and divorce data.	Durkheim's theories were empirically supported and in addition the study verified his original analysis that Catholics have lower suicide rates than non-Catholics.
Ellis & Smith (1991)	U.K.	100 participants completed the R.F.L. Inventory, a spiritual wellbeing scale and a social desirability scale with an aim of exploring the relationship between spirituality, social desirability and reasons for living.	Religious beliefs are closely related to adaptive cognitive explanations for not committing suicide. Hence there is a high positive relationship between an individual's religious well-being and his moral objection to suicide.
Gouldner (1975)	U.S.A.	Influential book which criticises the dominant functionalist paradigm adopted by most American sociologists.	Religion acts as a buffer to suicide offering an alternative to society's materialistic or paternalistic merit system. Religion offers status and rank according to moral values and therefore strengthens anti-suicidal tendencies in those who might otherwise be hopeless or desperate.
Johnson et al. (1980)	U.S.A.	Research which analyses the attitudes of a cross sectional sample of 1,530 adults concerning euthanasia and suicide.	Participants who score highly on religiosity scales were highly likely to reject euthanasia and suicide as solutions to especially difficult situations.
Klagsburn (1977)	U.S.A.	Wide-reaching survey of youth suicide in the U.S.A.	The report emphasises the communal aspects of religious activities acting as a safety buffer against suicide ideation.
Pescosolido & Georgianna (1989)	U.S.A.	Redirects debate over Durkheim's religion-suicide link away from specific empirical details to a consideration of Durkheim's general proposition regarding religion's protective power.	Reaffirmation of Durkheim's initial hypothesis through a social network paradigm.

Seiden (1969)	U.S.A.	Literature review of various aspects of adolescent suicide – specifically epidemiology; individual, social and cultural determinants and aetiology.	Strong religious belief together with active participation in a religious communal life is associated with a decreased suicidal risk.
Stack (1982)	U.S.A.	Review of major works on suicide classifying the reports into 4 analytic categories according to their theoretical emphasis:- cultural, economic, modernization, and social integration.	The research suggests that in today's modern and highly secularized society, religion has little if any effect on suicide activity.
Stack (1983)	U.S.A.	Comparison of suicide rates and religious books as percentage of all books produced in a country.	Religious commitment was negatively related to total suicide rates in females. As females become more involved in secular life and institutions, religion has less of an effect on their behaviour.
Stack (1983)	U.S.A.	Analysis of relationship between suicide and religiosity using data on work roles and household responsibilities.	Religion reduces suicide ideation but only in depressed or hopeless participants.
Stack (1991)	U.S.A.	Assessment of longitudinal data to calculate rates of suicide and the relationship with the religiosity variable.	Religious trends are unrelated to gender of suicide victim but are a function of the age of the victim. Religious trends are particularly relevant in adolescent victims.
Stack & Wasserman 1992	U.S.A.	Micro-level data on suicide attitudes was used to check previous research including analysis of national data on large participant group of Protestants.	Members of Churches which promote network involvement, especially those with conservative theologies, noncumenical relations and those whose teachings were in conflict with greater society, showed lower levels of suicide ideation.
Stengel (1975)	U.K.	Review of suicide in terms of personal unhappiness combined with the belief that one's fellow is powerless to remedy the condition.	Religious belief combined with active participation in a religious communal life is associated with a reduction in suicide activity.
White (1989)	U.S.A.	Survey of methods of coping with adolescent conflicts and stress including suicide. Extensive use of case studies.	Fear of negative consequences of suicide - both in this world and the next - serve as a deterrent to suicide behaviour.

Table 2.1 shows how, more than a century after Durkheim proposed his initial theory regarding suicide and religion, the vast majority of studies have upheld his thesis. Notwithstanding certain notable exceptions the consensus of the research endorses the inverse relationship between the various measures of religion and suicide ideation and acceptability. The more recent research has tended to delineate the basic assumptions, introducing factors such as the age or gender of the participants. In addition, secondary theories relating to communal support and social networking have gained popularity.

Suicide in the context of different religious creeds

Although religion is often presented as a unilateral variable, it is clear that under the cosmic umbrella of 'creed and faith' lies a great diversity of both doctrine and outlook. Thus each religion, indeed each religious sub-group, presents its own perspective on suicide activity and although there is clearly common ground, the differences appear to be critical to an understanding of the specific effect of religious doctrine on any one cultural sub-group. Durkheim himself was clearly interested in the effects of different religions and religious sub-groups on the suicide variable. He suggested (1897) that the rates of suicide amongst the Jewish population were lower than those of both Catholics and Protestants essentially due to the close knit family support network which was particularly prominent amongst the Western European Jewish communities with which he was familiar. Being Jewish himself, it is plausible to presume that he held a particular interest in the ranking of the Jewish population in comparison to other faiths.

This need to go beyond the general religious classifications has, over the years, been touched upon in research papers such as that of McKinen & Wasserman (1997) who suggested that suicide rates tend to vary considerably between areas with a predominant religion. They cited recent figures showing that Catholic countries in Europe average 12.5 suicides per 100,000 capita compared to 17.6 per 100,000 in Protestant countries. Their conclusion was that the doctrinal nuances associated with each religious sub-group have a significant effect on attitudes to suicide and are critical to an understanding of the intricate relationship between religion and suicide. In broad terms, among monotheistic religions suicide is considered a sin against G-d. Early Christian leaders became concerned about a phenomenon of 'voluntary martyrdom' at the hands of the Roman oppressors. Although self-sacrifice was

regarded as laudable, the ultimate sacrifice of voluntary martyrdom was considered egotistical and sinful (Tondo & Baldessarini, 2001). As early as the fourth century C.E., Saint Augustine (354-430) officially condemned suicide. Citing the sixth of the Old Testament's Ten Commandments, he declared it an act against G-d (Saint Augustine, edition 2000). In 533 C.E. the Roman Catholic Council of Orleans formally stated that suicide was either the work of the Devil or an act of insanity. In 563 C.E. the Council of Barga aligned Christian ritual convention with the ancient Jewish principle of forbidding the burial of suicide victims within consecrated burial grounds (Sullivan, 1982), with the additional provision of piercing the bodies with a stake as a protection against their evil souls (Lipsedge, 1996). Saint Thomas Aquinas (1225-1274) noted that suicide was a particularly grave sin in that it denied the possibility of remorse and repentance (Minois, 1999).

In the twentieth century Christianity apparently began to relax its view of suicide and even though it was still officially condemned as late as 1983, throughout the second half of the twentieth century the Church was speaking of suicide in terms of a sin which was lacking in *effective conscience*. Notwithstanding, as late as 1995 Pope John Paul II included suicide in a list of sins which were comparable to homicide and genocide (the list also included abortion and euthanasia) thus emphasising the specifically Catholic attitude whereby suicide is seen as a mortal sin which actively deprives the soul of the opportunity to receive 'eternal grace'.

The Islamic faith has also generally condemned suicide, maintaining that destiny is determined by Allah and that any interference in his plan is both blasphemous and sacrilegious. The Qur'an forbids a person to kill him/herself, and Islamic tradition maintains that the suicidee is condemned to perpetual hell, always excluded from heaven, and can never be forgiven (Ladha, Bhat & D'Souza, 1996). The exception to

this general principle appears to be the practice of suicide as a form of self-sacrifice specifically in the context of holy wars (Houmanfar, Hayes & Fredericks, 2001; Wright, 1985).

Hinduism is the generic term given to the wide range of religious practices of India, having the Vedic scriptures as their basis. Although Hinduism holds a less consistent single tradition than the monotheistic religions, in general it appears that suicide was not prohibited in the early Vedic period. Later Hindu writings, however, tended to oppose suicide (Ladha et al., 1996), but the belief in reincarnation which is central to the Hindu tradition makes the eternal prospects facing the individual committing suicide less forbidding than they would be for the suicidee in the monotheistic context (Hassan, 1983).

Kamal & Loewenthal (2002) compared suicide ideation and beliefs in a sample of Hindus and Muslims. The Hindus score consistently lower than the Muslims in the *reasons for living* scale leading the authors to conjecture that, in contrast to the monotheistic religions, Hinduism tends to be more tolerant of suicide. Arguably this outlook is also due to the quintessential belief in the eventual detachment of the soul from the body and reincarnation. Indeed, within Hindu religious doctrine, suicide has a ritualistic role, for example in the practice of *suttee* whereby a widow, by taking her own life, is able to cancel her dead husband's sins and so gain honour for their children.

Buddhism's attitude to suicide is also related to the soul's detachment from the body, but unlike Hinduism, the Buddhist religious philosophy condemns suicide as a violation of destiny and sees any attempt to avoid predestined suffering as both futile and iniquitous (Dublin, 1963).

Suicide in Jewish Law

In the Jewish religion where “the duty of preserving life, including one’s own, is one of the paramount injunctions” (Cohn, 1972 vol.15 p.489) the prohibition against suicide is found throughout both the written and the oral law. In the Bible, the Genesis injunction “Surely the blood of your lives will I require” (Gen. 9:5) and the commandment in Exodus “Thou shall not murder” (Ex. 20:13) are both explained by the Rabbis as referring specifically to the taking of one’s own life (see *Midrash, Bereishit Rabba*, 34,13; Talmud, tractate *Baba Kama*, 91b). In the Talmud, the sages reiterated the unacceptability of suicide, repeatedly suggesting that it is a sin which is worse than murder in that it leaves no opportunity for atonement. (For specific references see: *Chatam Sofer, Even Ha’ezer*, 69; *Yoreh Deah*, 326; *Gesher HaChayim*, part 1 25,1; *Tzitz Eliezer*, 10,25 (6:4).)

The Oral Law offered various explanations including ideas such as that our bodies are not our own to do with as we please but belong to G-d; or that suicide is a cardinal sin, since it denies the option of remorse, repentance and consequently exoneration. Unprecedented harsh punishments were imposed on the suicide victims; no burial rites were to honour him, and his body was to be buried in unconsecrated earth outside the cemetery. In addition the Rabbis decreed that one who commits suicide will not have ‘a portion in the world to come’ (*Tosfot Yom-Tov* and *Tiferet Yisrael* on I 10:1; I on Maimonides *Mishneh Torah*, Laws of Mourning 1,11).

Despite this categorical outlook there are three clearly-defined circumstances in which the Jewish tradition insists that suicide is not only permissible, but that not to commit suicide is equally sinful. Specifically the *Torah* refers to situations of forced idol-worship, murder and incest (Babylonian Talmud, Tractate *Sanhedrin*, 74a).

Although the *Halachic* framework seems relatively straightforward, throughout history there have been examples of suicides which despite not strictly corresponding to one of the three defined exceptions, have been accepted by the Rabbis as being at least tolerable and often laudable. Possibly the most famous example in the Bible was King Saul who fell on his sword so that the Philistines would not torture him (Samuel II, 1:5-10). In Halachic terms this exception is categorized in tractate *Yoreh Deah* (345:3) as the case of suicide being permitted when one fears being mutilated or tortured. Two later episodes are often cited: after the destruction of the second Temple, Eleazar ben Yair led a collective suicide of some 900 people at the fortress of Masada in the Judean desert rather than surrender to the Romans. The second example took place in York, England. Anti-Jewish rioting broke out, despite the king's orders that the Jews were not to be molested. The Sheriff of York allowed the Jews to take refuge in the royal castle, Clifford's Tower which was then surrounded by a mob intent on killing the Jews and plundering their possessions. The Jews of York committed mass suicide on the Sabbath before Passover, corresponding to the 6th of March 1190. The few who did not give up their lives pleaded to be allowed to escape death by converting to Christianity. Their request was accepted and reassured they left the castle only to be subsequently massacred by the mob (Jacobs, 1999).

The various Jewish Codes of Law have made essential distinctions between suicide whilst of sound mind - which results in the various retributions, limitations in burial rites and mourning restrictions - and suicide whilst of unsound mind which is seen in a somewhat more forgiving light (see Maimonides [12th century], *Mishneh Torah*, Laws Regarding Murderers, 2,2, and Joseph Caro, *Shulchan Aruch* [16th century]). In short, as Rosner (1977) points out, whilst Judaism sees suicide as sinful and

proscribed, it acknowledges extraordinary circumstances in which a more lenient attitude should be adopted.

Arguably the loophole of unsound mind has, in recent times, been dispensed and possibly exploited far too freely and it is reasonable to suggest that the strong deterrent and prevention strategy which was built into the *Halacha* has, over the years, been somewhat watered down.

Continuing to examine Durkheim's comparative theme, recent studies have found lower rates of suicide in the Jewish population especially when compared to the Christian Protestant community (Gross, 1971). Indeed a comprehensive survey written in the 1960s argued that suicide amongst Jewish people is rare (Dublin, 1963). One particularly important longitudinal comparative study carried out by Danto & Danto (1981) looked at suicide rates in the State of Michigan in the U.S.A. They noted that whereas the non-Jewish rate of suicide was 14.1 per 100,000, the comparative rate for the Jewish population was only 6.9 per 100,000. Similarly, according to Williams (1997), 2.9% of a U.S. adult sample had attempted suicide at least once in their lifetime, whereas in a comparable Jewish sample (Levav et al., 1988) the figure was 1.4%.

Despite the clear prohibitions, the orthodox communities of the various major religions have not been shielded from the scourge of suicide. It is even possible that elements rooted in religion might in some way *positively* affect attitudes towards suicide. One salient example is the troubled period that many religious adolescents go through in which they find themselves struggling with fundamental questions of faith, doubting even basic tenets of their religious conviction. Such a crisis of belief might well affect the adolescent's attitude to, or acceptance of suicidal behaviour. Furthermore, it seems feasible that a religious person experiencing such a crisis of faith may be more at risk than a non-religious person struggling with similar issues.

For example the philosophical, theoretical musing of a secular adolescent regarding the existence of a Divine Being can in no way be compared to the painful and heart-wrenching crisis of faith felt by a religious adolescent who has grown up believing absolutely in the existence of G-d and in His complete relevance to everyday life.

Table 2.2 summarises research linking suicide to the different world religions including specific reference to the position of the different religions vis-à-vis the suicide victim.

Table 2.2: Research regarding suicide in reference to the different world religions

Study Source	Country	Religion	Source and type of information	Findings and conclusions
Cohn (1972)	Israel	Judaism	Encyclopaedia reference	In the Jewish religion the duty of preserving life, including one's own, is a key injunction.
Danto & Danto (1981)	U.S.A.	Judaism	Research examining suicide rates in the State of Michigan in the United States of America.	The authors noted that whereas the non-Jewish rate of suicide was 14.1 per 100,000, the comparative rate for the Jewish population was only 6.9 per 100,000. The results echoed Dublin's (1963) assessment that comparatively speaking, suicide in Jewish people is rare.
Dublin (1963)	U.S.A.	Buddhism	Wide reaching sociological and statistical analysis of suicide research in the U.S. with a useful focus on the religious background of the participants.	Buddhism's stand on suicide is related to the soul's detachment from the body. Unlike Hinduism, the Buddhist philosophy, condemns suicide as a violation of destiny and sees any attempt to avoid predestined suffering as both futile and iniquitous.
Houmanfar, Hayes & Fredericks, (2001)	India	Islam	Research comparing attitudes of various religions to a range of cultural issues.	An exception to general Islamic anti-suicide stance is the practice of suicide as a form of self-sacrifice specifically in the context of holy wars.
Kamal & Loewenthal (2002)	U.K.	Hinduism	Research comparing suicide ideation and beliefs in a sample of Hindus and Muslims.	In contrast to the monotheistic religions, Hinduism is more tolerant of suicide. This seems to be due to the basic beliefs in the detachment of the soul from the body and reincarnation. Research shows for Hindus, suicide has a ritualistic role, eg in the practice of suttee whereby a widow is able to cancel her dead husband's sins and gain honour for their children.

Laha, Bhat & D'Souza (1996)	India	Islam	Research investigating the socio-demographic and clinical profile of suicide attempts in a general hospital in India. Particular emphasis was placed on the cross-cultural aspects of the results.	The Koran forbids a person to kill him/herself, and Islamic tradition maintains that the suicidee is condemned to perpetual hell, always excluded from heaven, and can never be forgiven.
Maimonides - Mishneh Torah (12 th Century)	-	Judaism	Rabbinical commentary on the <i>Torah</i> which gives a detailed list of all the commandments.	One who commits suicide will not have 'a portion in the world to come'.
McKinen & Wasserman (1997)	Italy	Christianity	Research relating suicide rates to the cultural background of the participants in various European countries.	Suicide rates tend to vary considerably between areas with a predominant religion. Specifically, Catholic countries have significantly lower rates than Protestant countries. Doctrinal nuances associated with each religious sub-group are critical to an understanding of the intricate relationship between religion and suicide in any one community.
Pope John Paul II (1995)	Italy	Christianity (Roman Catholic)	Papal declaration.	Suicide is included in a list of sins which are comparable to homicide, genocide and euthanasia. Emphasises the specifically Catholic attitude whereby suicide is seen as a mortal sin which actively deprives the soul of the opportunity to receive 'eternal grace'.
Rosner (1977)	U.S.A.	Judaism	Reference work which links modern day medical ideas and practices to their roots in the written and oral Jewish traditions.	Whilst Judaism sees suicide as sinful and proscribed, it acknowledges extraordinary circumstances in which a more lenient attitude should be adopted.
Tractate Sanhedrin, Babylonian Talmud (5 th Century)	-	Judaism	Reference from Babylonian Talmud.	Three situations in which suicide is not considered a crime: forced idol-worship, murder and incest.

Table 2.2 shows the disparity between the monotheistic and non-monotheistic religions in their attitudes towards suicide. Notwithstanding certain cosmetic differences and with the exception of the Islamic 'holy war', all the monotheistic religions reject the concept of suicide and are unforgiving in their various attitudes. Conversely the outlooks of the central non-monotheistic religions (Hinduism and Buddhism) range from theological rejection coupled with practical acceptance, to the inclusion of suicide within the religious doctrine.

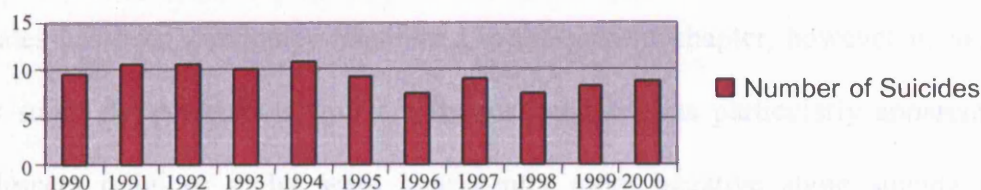
Suicide in Israel

With specific reference to Israel, there has been only a limited amount of research concerning the relationship between suicide and religion.

In general, suicide rates are noted to be lower in Israel than in other modern Western countries including America (Levav & Aisenberg, 1989). See tables 2.3 and 2.4.

Table 2.3: Suicide rates in Israel 1990-2000 (per 100,000)

* figures reproduced from *Israel Ministry of Health*, internet site (www.health.gov.il) accessed on 09/06/06.



Indeed, there is evidence that suggests that the suicide rates in Israel are amongst the lowest in the world (Kohn et al., 1997).

Table 2.4: International rates of suicide (per 100,000)

* figures reproduced from *International Violent Death Rates*, internet site (www.guncite.com/gun.control.gcgvintl.html) accessed on 26/5/06.

Country	Year	Rate of Suicide
Australia	1994	12.65
Denmark	1993	22.13
England	1992	7.68
Israel	1993	7.05
Japan	1993	15.75
Netherlands	1994	10.10
United States of America	1993	12.06

It is important to note that the minor inconsistency between the suicide figures for Israel as reported in tables 2.3 and 2.4 is apparently due to shifting patterns in the way that suicide statistics are attained and was deemed not to significantly effect the overall picture.

Notwithstanding these somewhat encouraging statistics, in a wide-reaching study, Stein et al. (1989) reported that the attitudes of Israeli youth towards suicide are primarily positive with almost half the subjects not regarding it as a shameful act. In their research, around two-thirds of the participants considered suicide as acceptable in certain conditions and more than two-thirds used positive adjectives to describe someone who had committed suicide (brave, idealistic, thinking etc). The authors further noted that *religious affiliation* influenced the attitude of adolescent males to suicide but not those of adolescent females. This disparity between males and females has been previously mentioned in the present chapter, however in Stein et al.'s study the correlation with a religious variable was particularly apparent and adolescent religious males were consistently more negative about suicide when compared to adolescent non-religious males. The authors tentatively suggest that the negative attitude of the adolescent religious males may result from a heightened exposure to - and hence a greater awareness of - traditional Jewish attitudes in general, including the specific negative attitude to suicide. This result is possibly also a reflection of the different male and female roles emphasised in traditional Judaism.

The religiosity construct

The aim of the present study is to examine suicide ideation and acceptance within a specific group: the Religious Zionist community of Israel. One of the key elements of the research is the religiosity of the members of this community and how this construct impacts on the different suicide variables. In the past, the religiosity variable has been shown to be problematic because of researchers' tendency to oversimplification. Holmes (1985) for example, in his review of Martin's (1984)

research on religiosity in United States suicide rates, complained of the propensity to use **group** data to draw conclusions about **individual** cases stating that:

“..... it is absolutely required that Church attendance of specific suicide and non-suicide cases be compared.”
(Holmes, 1985 p.580)

Twenty years ago Breault (1986) highlighted the hazards in the experimental usage of the religiosity construct, suggesting that an ideal measure of religiosity would include not only affiliation or membership (Martin [1984] for example measured religiosity **only** according to frequency of Church attendance) but would also take into account the degree of involvement and commitment. It appears, however that Breault’s warning has largely gone unheeded and that still today even serious research which (unusually) does elect to include information on religiosity, will tend to gather the information as a unifactorial construct such as religious books as a percentage of all books produced in any one country (see Stack, 1991). Weaver et al. (2003) showed that in all the articles that were published in the ‘Journal of Traumatic Stress’ in the 1990s which related to religion and spirituality, nearly half looked only at religious affiliation. The study went on to show that **even** these studies lacked any citations on religion indicating that:

“the measurement of religion was clearly incidental to the research”
(Weaver et al., 2003 p. 224)

Although attempts have been made to refine the definition of this construct – Dublin as early as 1963 tried to address the issue by suggesting that religiosity needs to be measured in terms of ‘affiliation’ – there is clearly still a critical need to finely tune the boundaries of the variable.

The present study has adopted Alan Berman’s definition (1974) which sees religiosity as a self reported level of involvement which relates to both belief and

activity. In order to quantify the construct and overcome previously mentioned problems of measurement the study has developed a more sensitive measure of religiosity employing three extensive questionnaires relating to religious belief, religious behaviour and religious motivation thus allowing for an intricate analysis of the relationship between religiosity and suicide and enhancing the understanding of the possibilities of prevention.

Suicide and the religiosity construct

With specific regard to suicide prevention, recent studies have suggested that it is not religion itself which is creating the buffering main-effect but religiosity, a derivative of the central construct.

Neeleman et al. (1997) analysed a series of variables with regard to suicide tolerance including *frequency of Church attendance*, *stated affiliation to a religious organization*, *religious upbringing*, and *religiosity*. The results indicated that of all the variables, *religiosity* was most strongly negatively correlated with suicide tolerance.

Stillon et al. (1984) attested that students who graded themselves as “high” in religiosity significantly disagreed with all motivation for suicide when compared to students who viewed themselves as “low” regarding religiosity. Similarly, Minear & Brush (1981) reported a strong relationship between adolescent *suicide ideation* as expressed in suicide value scales, and *belief in an afterlife* and *Church attendance*. From their research they concluded that non-religious youth are more likely to see suicide as a viable option when faced with harsh life situations. Johnson et al. (1980) found that *religious affiliation* is not predictive of attitudes towards suicide but rather that *religiosity* is an important predictor. Hoelter (1979) went even further, claiming

that acceptability of suicide in adolescents is an inverse function of the religiosity of the participant.

In recent years the area of religiosity has once again begun to receive closer scrutiny and critical analysis. A landmark study was carried out by Lester & Francis (1993). They explored the extent to which measures of religiosity are associated with current and previous suicide ideation. They noted that when the personality correlate of *suicide ideation* is moderate or weak, *religiosity* scores indeed provide a significant contribution to suicide prediction. Notably, however, the study suggested that when the personality correlate of suicidality was strong, for example in the neurotic personality, then religiosity does not offer any significant predictive power. The authors concluded that religiosity is only a strong inhibitor of suicidal ideation in certain circumstances. This research is not only significant in its empirical findings (indeed the results have been challenged by various other studies), but in its attempt to delve beyond the static terminology of religiosity and to understand the intricate workings of the variable.

Neeleman et al. (1997) categorically stated that *Church membership* and *attendance* are unreliable predictors of suicide when compared to *religious belief* and *suicide tolerance*. Similarly, Diekstra & Kerkhof (1989) showed *suicide tolerance* to be a good predictor of *suicide risk*. These cogent assertions provide a further foundation for the present research in their implication that the science of suicide prediction must reach further than the traditional attendance and membership functions and that religious belief and suicide tolerance (two of the foremost dependent variables of the research) are critical factors in the labour of suicide prediction and hence prevention.

In particular reference to the research area of suicide, the variable of religiosity has suffered not only from over-simplification, but also from a chronic case of under-

employment. Indeed, notwithstanding the studies cited in this chapter; it appears that religion has played a relatively minor role in suicide investigation. This omission is exemplified in the lack of attention paid to religious issues in almost all of the scales that have been developed to assess suicide risk. The designers of the majority of these scales appear to show no awareness of how religious beliefs might, by their presence or absence, serve as predictive factors. Somewhat strangely, they tend to ignore the possible importance of what a person who is about to end his life, thinks about life and death, or life after death. Intuitively, these are vital issues when attempting to understand the processes involved in suicide and consequently in any attempt to predict those who are at risk. This lack of information is particularly poignant when the participants concerned are religious and as Peterson & Roy (1985) point out, for those people for whom religion is a central factor in their lives, the significance of religion when trying to understand stressful life events will be critical. Schultz-Ross & Gutheil (1997) have proposed an interesting though somewhat worrying explanation of this phenomenon. They suggest that the over-simplification of the religiosity variable and the often ominous omission of questions regarding religion and religiosity in the vast majority of suicide questionnaires may be rooted in the clinicians themselves. It may be that they experience countertransferential conflicts concerning religion, religious beliefs and thoughts about life after death. The authors raise the troubling possibility that therapists' own inhibitions may be mirrored in their clinical research and consequently in the development of the various scales and questionnaires.

The problem of underemployment is found not only in research but also in a clinical context, and whilst therapists have been encouraged to utilize religious beliefs with suicidal clients who already profess to certain levels of religious commitment (Dublin, 1963), in general, not enough weight is given to religious beliefs when

clinicians are dealing with stressful situations. Post (1992) argued that most therapists view religious expression as irrelevant unless it is expressly contributing to the client's psychopathology. Neeleman & Persaud (1995) suggested that for many patients with psychiatric problems, religion is an important aspect of their lives and that clinicians might be able to make more use of its stress-reducing and adaptive potential. They concluded that the fault lies with the clinicians and called on the profession to address the issue with the gravity that it deserves:

“Psychiatry has been biased against taking full account of religious beliefs for many possible reasons, such as its focus on biological causes of mental illness and its reliance on empirical as opposed to phenomenological methods. Psychiatrists are unlikely to be religious themselves and they may, as a result, tend to consider religious belief as a consequence of a pathological process. There may have been a failure to appreciate the multidimensional nature of religion and crucial related phenomena such as dependence and guilt. All these factors, and probably more may have led to a disregard for the healing or adaptive aspects of religious beliefs. It is only when the profession gains insight into its own difficulties with religious belief that it will be able to accommodate this important variable in research and practice.”

(Neeleman & Persaud, 1995, p.175)

Notwithstanding these ingrained difficulties Hathaway (2003) emphasizes that recently certain researchers and clinicians have managed to create a clinical environment in which more attention is granted to religious issues. He suggests that an illustration of this is the inclusion of the ‘Religious/Spiritual Problems’ V-Code (V62.89) in D.S.M. IV (the American standard volume on psychiatric diagnoses). Ellis & Smith (1991) clarify that if religious beliefs in a suicidal client are strong, then it should be presumed that religion can be used as factor in prevention. They further elaborate that religious beliefs which often give meaning to life and hope for the future may augment certain adaptive functions which naturally aid suicide prevention.

In light of these research stumbling blocks, the present study attempts to divine the variable of religiosity and to verify its impact on *suicide ideation* and *acceptance* for the specific research sample of the Religious Zionist community in Israel. Table 2.5 summarises the research connecting suicide to religiosity.

Table 2.5: Research connecting suicide to religiosity

Study Source	Country	Source and type of information	Findings and conclusions
Hoelter (1979)	U.S.A.	Questionnaire data (n=205) verifies if suicide acceptability is a decreasing function of <i>religiosity</i> and <i>fear of death</i> .	The data suggested that <i>religiosity</i> and certain aspects of <i>fear of death</i> are significantly related to suicide acceptability.
Johnson et al. (1980)	U.S.A.	Analysis of attitudes of cross-sectional sample of 1,530 adults concerning euthanasia and suicide.	It is not religious affiliation which is predictive of attitudes towards suicide but rather the specific variable of religiosity which is an important predictor.
Lester & Francis (1993)	U.K.	103 non-clinical participants answered various questionnaires on suicide ideation and religiosity.	Religiosity was weakly associated with prior or current suicidal ideation even after locus of control and depression scores were taken into account.
Minear & Brush (1981)	U.S.A.	Students reported their attitudes toward suicide, their anxiety about death, their degree of religiosity, the substance of their religious belief and the seriousness with which they had considered suicide.	Correlation between personal suicide ideation, general suicide acceptability in certain situations, and anxiety felt about death, with religious commitment.
Neeleman et al. (1997)	U.K.	Linear regressions were used to examine ecological associations between suicide tolerance, religion and suicide rates in 19 Western countries.	Of all the variables tested (frequency of church attendance; stated affiliation to a religious organization; religious upbringing, and religiosity), religiosity was most strongly negatively correlated with suicide tolerance.

Table 2.5 reports on the central recent research relating the variable of *religiosity* to suicide and shows how with one poignant exception (Lester & Francis, 1993) all the studies support the usefulness of this variable when discussing suicide even when compared to other measures which specifically relate to religion.

Specifically adolescents!!!

The present study focuses specifically on the older adolescent grouping of suicide statistics (18-24 years old). Here too the choice has proved particularly challenging. The period of adolescence is the time when questions of identity become crucial (Erikson, 1968). The paradoxical contradiction of physical and social maturity coming together with a lack of true independence can create confusion and tension. Gibbs & Martin (1981) refer to this period as “status incompatibility” referring to a situation whereby a young man/woman is capable of bearing children or driving his/her own car but is still seen as a minor in terms of legal situations such as drinking, or sexual relations. In addition it is a period of probing and searching for meaning in life. Tyerman & Humphrey (1981) refer to the general difficulties of this age-group in terms of rapid change of status. They discuss how overnight the older adolescent is thrust from the sheltered high-school environment into a rapidly changing and mobile society. Adjustment difficulties, alienation and insecurity are all normal and even expected responses.

These challenges and adjustment difficulties appear to be much more acute in Israeli society in which the eighteen year-old school-leaver becomes within a matter of weeks a new army recruit. These conditions are, in many ways, parallel to Durkheim’s anomic construct in which the situation of rapid and abrupt change leaves old norms irrelevant and the adolescent in a state of confusion.

Coincidentally the issue of ‘rapid rate of change’ is further noted in the analysis of Religious Zionists in Israel in chapter three where it is shown to be a critical factor in the development of the community, particularly in recent years. It seems credible that the impact of the swift rate of change is compounded when the two areas (the

Religious Zionist community in Israel and the adolescent age bracket) together become the basis of a single study!!

The gender variable

The issue of gender differences and religiosity has not been widely covered by empirical research and yet certain studies have heeded caution in this field suggesting that men and women should possibly be treated differently in cultural-religious studies. Loewenthal et al. (2002) simply yet critically asked if women are more religious than men. Their answer was significantly more complex than the question but essentially the authors concluded that the general assumption that women are more religious than men is in fact both culture-specific and also very much dependent on how religiosity is measured. Francis (1997) in his comprehensive review of empirical studies relating to gender and religion, concluded that recent gender orientation theories (see for example Bem (1981)) provide the most useful approach to understanding the contrasting outlooks of men and women regarding religion and the associated differences pertaining to levels of religiosity.

Specifically in reference to suicidality, Neeleman et al. (1997) suggested that the protective effect of religiosity and religious behaviour against suicide is different for men and women. They proposed that males are far more affected by sociological factors such as the community in which they live, whereas suicide tolerance in women is more simply related to their religious beliefs and observance.

Presto et al. (1995) suggested that participants who self-reported that they practised their religion, rated suicide as being more unacceptable than participants who did not practise or who practised their religion infrequently. Interestingly Presto's research highlighted a three-way interaction (gender of evaluator, by religiosity of evaluator,

by gender of victim) which affected the results so that, for example, religious males rated the suicides of female victims more unacceptable than suicides of male victims. They suggested that the results might represent differing social standards of suicide acceptability for men and women, i.e. it is socially more unacceptable for women to commit suicide perhaps because women may be viewed as abandoning their family caretaker role. This view however is only relevant for religious males and hence the range of results.

Chapter Three

The Religious Zionist Community in Israel

"Naturally a religious person's political views are affected by his beliefs." Interview 6

Introduction

The Religious Zionist community of Israel is thought to number around 850,000 people, approximately 13% of the population of Israel¹. The following chapter will attempt to provide a brief review of the community highlighting its historical development and its significance within the general make-up of Israeli society in the twenty-first century.

Throughout the history of the Jewish people there have been divisions within communities based on levels of orthodoxy, communal status, ethnicity and particularly in relation to the diversity of outlooks and attitudes towards religious beliefs and observance. In Israel today Jewry again finds itself highly divided into groups and subgroups each with its own idiosyncratic characteristics of lifestyle and systems of belief.

Religious Zionism - A point on the continuum

One such division can be defined through the spectrum of Orthodoxy, whereby Israeli Jewry today can be split into Secular, Traditional, Ultra-Orthodox and Modern Orthodox (Sheleg 2000).

¹ This statistic is based on a sample survey conducted by *Modi'in Ezrachi*, Research Institute in December 1997 as quoted in Soffer & Korenstein, (1998).

In crass, caricaturist terms, the Secular Jew defines himself as being born Jewish without necessarily assigning any religious significance to this anthropological detail. He does not necessarily believe in G-d and sees no linkage between his being Jewish and any obligation to perform traditionally Jewish rites or commandments. The Traditional Jew maintains an essentially secular lifestyle whilst retaining a strong sense of Jewish identity usually upholding certain ritualistic religious traditions. These practices might well be observed through a love of the tradition rather than as a religious imperative and are often related to family and social customs. An example might be the significance of the Sabbath meal on Friday night or fasting on *Yom Kippur*. The Ultra-Orthodox Jew places the upholding of the precepts and commandments at the very centre of his existence. Religious observance is his first and effectively only responsibility and his life is totally guided by this dictum. Anything which might be regarded as detracting from G-d's sanctity is profane and therefore forbidden – an example might be television or secular studies. The Modern Orthodox Jew leads his life in an existential search for synthesis. He is non-compromising in his adherence to the religious precepts whilst recognizing the intrinsic benefits of the modern world. He lives his life in secular surroundings, availing himself of the benefits of a modern lifestyle whilst attempting to root out that which is contrary to his religious existence. He might own a television but will censor the programs that are watched. He will avail himself of a secular education whilst continuing with his religious studies. He will dress himself in modern western attire but will ensure that his clothes are in line with precepts pertaining to modesty. According to Chief Rabbi Sacks² (1989) three of these four approaches can be directly related to three key rabbinical figures from the eighteenth and nineteenth

² Rabbi Dr. Jonathan Sacks is the Chief Rabbi of the United Kingdom and the Commonwealth.

centuries: Moses Mendelssohn (1729-1786) founded the Enlightenment Movement which advocated total integration in the secular world and was a clear precursor of the Secular Judaism that is prevalent today. Moses Sofer (1762-1839), popularly known as the *Chatam Sofer*, promoted an unyielding opposition to any involvement in modernity and laid the foundation for the Ultra-Orthodox detachment, disinterest and disdain of the contemporary world. Samson Raphael Hirsch (1808-1888) advocated secular education and involvement in the secular political world together with strict religious observance, making him one of the forebears of Modern Orthodoxy.

Within the context of modern Israeli society, the Religious Zionist community is most closely associated with the Modern Orthodox sector (Fishman, 1995). As will become apparent, the Religious Zionists span a wide range of religious belief and expression, and yet in spite of this, they are still broadly associated with the Modern Orthodox outlook.

Religious Zionism – a historical perspective

Zionism is the nationalist movement whose goal is the return of the Jewish people to Zion (an early synonym for Jerusalem and the whole of the land of Israel). The term was first coined in 1890 by Nathan Birnbaum (1864-1937), a Viennese publicist, and gained credence by the end of the 19th century denoting the political aspiration for the Jewish people to return to their ancient homeland and to reassume sovereignty over the land. This aspiration was formidably expressed by Theodor Herzl (1860-1904), the Viennese playwright and journalist and the movement's foremost visionary and spokesmen. It was officially adopted at the First Zionist Congress in Basle in 1897.

Indeed Herzl captured the essence of the early Zionist dream when he wrote in his personal journal:

“In Basle I founded the Jewish State ... Maybe in five years, certainly in fifty, everyone will realize it.”

(Theodor Herzl, Jewish Virtual Library, www.jewishvirtuallibrary.org., accessed 16/5/06)

Religious Zionism initially developed in the Diaspora, specifically in Central Europe, at a time when socialist, nationalist and political Zionist theories were growing rapidly. The original founding fathers including Rabbi Zvi Hirsch Kalischer (1795-1874) and Rabbi Yehuda Alkalai (1798-1878) as well as most of their followers discovered the political cause of Zionism only **after** their religious identity had been formed and become strong. They saw the emancipation of European Jewry and the associated rise in the Jews' economic and social condition as a signal of the beginning of the Redemption - the long awaited epoch heralded by the Messiah when true peace will envelop the world. This long anticipated Deliverance could, in their understanding, only be realized through the return of the Jewish people to Zion. The inclusion of the centrality of the land of Israel as a modern-day Jewish homeland into the framework of their religious beliefs came, on the one hand, as a response to world phenomena such as growing public anti-Semitism and a rise in nationalistic tendencies for many homogenous groups around the world, and on the other hand as a natural progression from their religious beliefs and historical consciousness (Bat-Yehuda, 1989).

Whilst for this first group of Religious Zionists there was apparently no contradiction between religious faith and Zionist convictions, already for the next generation, the path to religious and ideological fulfilment was confusing and conflictual (Aran, 1987).

As Aran suggests, the second generation of Religious Zionists, growing up in the 1940s and 1950s in Israel, were subject to a mixed and often confusing message. More often than not their teachers were Ultra-Orthodox rabbis who represented for these youngsters the Diaspora Jews that their parents had rejected and left behind in Eastern and Central Europe. Their parents, however, could not yet constitute a new role model and the figures that these youngsters looked up to and revered were often the young, **secular** Zionist heroes. It was a period when many of the young Religious Zionists became uncertain of the religious beliefs, and became irreligious. Although the vast majority were educated at religious primary schools, many requested to complete their secondary education at the prestigious secular high schools. This specific phenomenon was widespread and very worrying for the community leaders to the point that Rabbi Amiel, the Chief Rabbi of Tel Aviv at the time compared the work of the primary school educators to farmers who are fattening up calves in preparation for idol worship. The metaphor relates to the practice of animal sacrifices which was carried out during Temple times and referred to the youngsters who attended religious primary schools and then moved on to secular high schools. They were being fattened up for the contemptible idol worship (becoming irreligious) as opposed to being offered up as holy sacrifices (and remaining within the religious fold). Within its cultural context the comment was grave and almost without precedent.

As a direct response to this situation the students of *Yeshivat Merkaz HaRav*³ opened an agricultural *Yeshiva* high school in Kfar Haroeh. The intention was to offer a high level, agricultural, pioneering-style education within a Religious Zionist framework

³A Talmudic Academy founded by Rabbi Abraham HaCohen Kook (1865-1935) – the first Chief Rabbi of Palestine and perhaps the most prominent rabbinic figure in Religious Zionist history.

combining religious and secular studies. The issue of pride was paramount to the school's ethos. There was a clear, if often subliminal message, that 'we too can be proud Zionist pioneers whilst not compromising in any way on our religious beliefs or practices' (Kfar Haroeh website, www.haroe.org.il, accessed on 03/01/04)

The 'challenge of synthesis' was already emerging as a central theme in the Religious Zionist/Modern Orthodox way of life and it is clearly one of the key elements in understanding the development of this population group, its success, its conflicts and its struggles.

To a certain degree the new school at the Kfar Haroeh village together with others that followed, succeeded in developing a new genre – religious youth, born and bred in Israel, boasting the proud *Sabra* characteristics⁴ whilst being confident in their religious heritage and actively and meticulously guarding the religious precepts and commandments. Indeed this new kind of youth could see itself as having an advantage over their secular brothers in that their Zionist conviction and pioneering spirit were rooted in a clear background of tradition and belief.

Significantly during this period the new *kippa sruga* (knitted, coloured male head-covering) made its appearance and became - perhaps more than any other feature - synonymous with the developing new genre (Sheleg, 2000). Until then the traditional black skull-cap had been worn by all religious males.

The next important milestone was the setting up of the first *Hesder Yeshiva* (Talmudic academy) next to Kibbutz Yavne in 1955. Until that time the eighteen-year-old young men from the Religious Zionist camp had, on finishing high school,

⁴Native Israelis have been compared to the indigenous sabra cactus fruit which is prickly and harsh on the outside but sweet tasting and pleasant on the inside.

been drafted into the army together with their secular contemporaries. *Hesder* the Hebrew word for 'arrangement' was a programme which combined advanced *Talmudic* studies with a shortened military service. It became a common choice for young Religious Zionists who were motivated to study *Torah* but who concurrently felt morally and religiously bound to help defend their people and their country. The usual three-year obligatory army service was extended to five years, approximately two years of which were spent in active service and three years studying *Torah*. The *Hesder* programme represented a solution to the problem of the young conscripts effectively interrupting their *Torah* studies for the whole period of their army service (Bar-Lev, 1995). It is apparent that solutions to socio-religious dilemmas were being sought along the spectrum of synthesis with a clear aim of 'having your cake and eating it'.

Parallel to the gradual development and shaping of mainstream Religious Zionism, a smaller, separate bloc was also striving to define itself within the broad base of the Religious Zionist community. This group was searching to create a stricter religious framework for themselves and their children. The areas of greater stringency were issues such as the degree of mixed-gender activities, modesty in dress, the attitude to Western culture, and the amount of time spent on *Torah* studies (Nehorai, 1996). A critical example was the wariness towards the mixed *Bnei Akiva* youth movement – a wariness which, in time, led to the creation of *Ariel*, a parallel youth movement with similar ideological leanings but with single-gender activities and camps. Furthermore, in 1972 the *Noam* school system was set up as a parallel framework to the National Religious Zionist school system, felt by some to be too lenient (Nehorai, 1996). *Noam* provided primary schooling for boys and was followed in 1982 by the creation of *Tzvia*, a foundation which set up similar schools for girls. Once again it is

important to remember that ideologically *Ariel*, *Noam* and *Tzvia* did not stray from the philosophical path of the Religious Zionist ethos but stressed greater stringency in all that was connected to religious behaviour and the keeping of the *Mitzvot* (commandments of the *Torah*) (Nehorai, 1996). The previously-mentioned *Hesder* programme is a further example of this outlook. Whilst the majority of Religious Zionists felt comfortable with the *Hesder* yeshiva and army model, there were those who felt that even the *Hesder* compromise which precluded the possibility of serious religious studies during the stage of active service, came too early in the course of the students' religious education. The more fervent sector of Religious Zionists opted for the alternative of delaying their conscription in order to study *Torah* in *Yeshivat Merkaz Harav*.

The process of searching for higher and higher levels of religious stringency appears to be an ongoing theme for at least part of the Religious Zionist camp (Nehorai, 1996). Within ten years of the setting up of the *Noam* educational framework it was deemed by some to be too lax and the *Talmud Torah Morasha* was established. These were schools, more commonly known as *Chadarim*, which demanded even greater stringency, in particular from the parents of the students. An example might be the requirement for the students' parents not to own a television or not to read secular newspapers.

This trend is representative of a central theme in the psyche of certain elements within the Religious Zionist movement. There seems to be a constant driving force which leads to an ardent search for more, either in the sphere of religious expression or Zionist ideological aspirations (Nehorai, 1996). For a certain element of this community, this antithesis of complacency leads to momentum on both axes of the Religious Zionist ideal.

The search for more has been alluded to from the perspective of religious stringency but it is equally prevalent in the area of Zionist idealism.

The Six Day War in 1967 led to major territorial conquests for the state of Israel: the Sinai desert; the Golan Heights; the Gaza Strip and the land mass between Israel's pre-war borders and the river Jordan termed *Yehuda VeShomron* or the West Bank (of the river Jordan). Within these areas, key historical sites such as Hebron and Shechem (Nablus), East Jerusalem and – more significantly - the Temple Mount and the Western Wall were all liberated as a direct result of a war which was initiated by Egypt, Syria and Jordan. The aftermath of the war saw Israel in a period of euphoria. The military triumph was seen as an almost miraculous victory and for many it served as an impetus for renewed faith and heralded a general religious fervour (Avruch, 1988).

The students of *Yeshivat Merkaz Harav* saw the events as living proof of the messianic prophesy of their Rabbinic leader who had always encouraged settlement in what was now becoming termed *Eretz Yisrael Hashlema* - the Entire Land of Israel. Beit-Hallahmi (1992) has suggested that this period witnessed a double revival. By joining forces with the politically nationalistic elements, the Religious Zionists gained importance and vitality and thus overcame years of political and social marginality. Conversely, the nationalist right wing gained a legitimacy which they had been craving since the setting up the state in 1948.

By 1974 *Gush Emunim* - literally the Bloc of the Faithful - the settler movement which had sprung up from within the Religious Zionist camp after the Six Day War, was embarking on a settlement programme in *Yehudah VeShomron* (Don-Yehiya, 1987). The political aspiration behind this was to create a reality which would

compel the Government to annex the territories which had been conquered in 1967.⁵

It is important to understand that the political agenda of *Gush Emunim* cannot be divorced from the fervent religious belief in the sanctity of the land of Israel and in the religious precept to settle the land. According to Liebman & Don-Yehiya (1984), the response of *Gush Emunim* was an attempt to establish religious sovereignty over the Land of Israel as a religious conquest. The political struggle, including the illegal setting-up of settlements, which began in 1974 at *Sebastia*⁶ (Shani, 2000) can also be seen in terms of a desire and willingness to go 'one stage further' in order to stretch the personal and communal limits of self-actualisation (O'Dea, 1977).

In order to understand the phenomenon of *Gush Emunim*, its appeal, particularly to the teenagers and young adults of the Religious Zionist camp, must be appreciated (Rubinstein, 1982). In terms of pioneering Zionist actualization the Religious Zionist movement had until the Six Day War followed the path laid down by the secular Zionists – through their political parties and through their youth movements. Now the Religious Zionist camp was leading a new Zionist mission. Liebman & Don-Yehiya (1984) point out that:

“...for the first time since the beginning of modern Zionism, the Religious Zionists became the central force in the settlement of the Land”.

(Liebman & Don-Yehiya, 1984, p.84)

With a new-found fighting spirit they were fulfilling the Zionist dream in terms of land settlement but equally in terms of personal struggle and sacrifice for the sake of 'the cause'. Liebman & Don-Yehiya (1984, p.86) suggest that “the Religious Zionists had a policy and an ideology that legitimized it”. The romantic ideals were clearly

⁵As indeed occurred with the Golan Heights in December 1981.

⁶The site of the archaeological remains of an ancient town in the *Shomron* which *Gush Emunim* chose to rebuild as a symbolic act of the new settlement in *Eretz Yisrael Hashlema*.

tempting for the young Religious Zionists and they offered for many of them an answer to questions which they had been posing regarding their role in the fulfilment of the Zionist dream. A parallel might be drawn with second and third generation kibbutz members who looked around at the remarkable achievements of their parents and grandparents and consequently found it hard to identify their own challenges and aspirations within the kibbutz framework.

The conflict between the State and the Messianic aspirations of *Gush Emunim* has been prominent, since the beginning of the settlement process in 1974 (Rubinstein, 1982). With the exception of a few brief periods when right-wing governments encouraged the direction of *Gush Emunim*, there has been an almost constant feeling of hostility between the government and these elements of the Religious Zionist camp.

In recent years a significant red line has been crossed with the bringing of this conflict to the front doorstep of the army (Tirosh, 1995). It is important to remember that the I.D.F. (Israel Defence Forces) is very much an army of the people. Compulsory conscription together with annual reserve duty results in the vast majority of the population having very close physical and emotional ties with the army, and in the national psyche it is seen as being off-limits to the unremitting and often heated political debate. Indeed, the army is often considered to be the last bastion of Israeli consensus. It is clear that this belief is not entirely based in reality, and the army - certainly in its higher echelons - is affected by and affects the political process. However, the myth remains deeply ingrained in the national consciousness. Thus with hindsight, the process was painfully predictable: certain settlements and outposts, which have been alternately defined as legal and illegal, have at various historio-political junctures been threatened with demolition. Various Rabbis from

within the Religious Zionist camp see the taking down of these settlements as an act of religious dissent and even sacrilege and have published *piskei halacha* (religious edicts) forbidding such action (Shush, 1995). In such an event the religious soldier's dilemma is abundantly clear: to heed his officer or his Rabbi? It should be noted that such dilemmas and conflicts do not only exist on a theoretical level but have in recent years been played out 'for real'.

The first Camp David Accords in 1978 represented a crisis for much of the Religious Zionist camp but in particular to the past and present students of *Yeshivat Mercaz Harav* (Sheleg, 2000). The Accords for the first time agreed on the demolition of settlements within the borders of Israel. Rabbi Kook had defined the settlement of the land as part of the process of redemption, a process that would bring about the coming of the Messiah (Kook, 1985). Furthermore he had emphatically stated that this process could move only forwards – it would entail setbacks but not withdrawal. Such a stance was not compatible with the withdrawal from the Sinai Peninsula⁷. In the months leading up to the withdrawal a campaign was organized with the slogan "There will be no withdrawal" - as indeed they had understood that Rabbi Kook had promised. The slogan even appeared on the cover of *Nekuda*, the right-wing journal published by the settlers' association. This glaring, public dissonance between the promise of Rabbi Kook - which had led to the widespread conviction that the withdrawal would not take place - and the painful reality, left many of the Religious Zionist camp deflated and confused (Har'el, 1995). There were attempts to re-explain the teachings of the Rabbi Kook in the light of the withdrawal, but the Rabbi was not alive to offer his own explanations, and the disparity had been so manifest that for

⁷The Sinai Peninsula was a massive land mass territory which included populated settlements and the town of Yamit.

many the explanations seemed contrived and served only to increase their feelings of spiritual confusion.

A comparison can possibly be drawn with the feeling amongst the Messianic faction of the Lubavitch Chabad movement on the death of its Rabbi whom they had believed to be the Messiah.

Recent Developments in the Religious Zionist Community

In recent years a transformation has taken place in the Religious Zionist movement especially amongst certain elements of the younger generation. Whilst one can still find youngsters who passionately believe in the ethos of ‘the sanctity of the entire Land of Israel’ and who are apparently still willing to make sacrifices for the sake of this cause, within the Religious Zionist community there is an expanding group of young men and women who seem to be more open to the secular world and its values and who are trying to integrate into the secular culture and way of life:

“Recently it is possible to observe a new type of young Religious Zionist. They have internalized the essential principles of the secular leisure culture in a way which would never have been acceptable before... These youngsters are not rejecting their religious identity. On the contrary, they seem to feel no conflict or contradiction between taking part in standard, typical secular leisure pastimes and their own self identity as religious Jews.”
(Sheleg, 2000 p.54)

A further transformation is a relatively recent trend epitomized by Rabbi Yehudah Amital (*Rosh Yeshiva* [head of Talmudic Academy] of the *Har-Etzion Yeshiva*). Rabbi Amital articulated an ideological shift from the focus on *Kibush Ha'aretz* (conquering the land) to *Kibush HaLevavot* (conquering the hearts) (Har'el, 1995). From his paradoxically positioned *Yeshiva*, in the West Bank settlement of Alon Shvut, Rabbi Amital proposed readdressing the ideological weighting of the sanctity

of the entire Land of Israel placing a greater emphasis on the People of Israel. This sociological outlook received tangible expression in new satellite *Yeshivot* which began to proliferate in the poorest of Israel's development towns such as Yerocham and Dimona (but significantly not in *Yehudah VeShomron*). It was a statement of the Religious Zionist's commitment to strengthening the weaker areas of Israeli society and was an important modification to the previously unidirectional ideological stance in the belief in the sanctity of the entire Land of Israel (O'Dea, 1978).

Religious Zionists become 'The enemy of the people'

The reasons for these changes - both in the direction of secularization and the change of emphasis from the land to the people - are, as yet, not entirely clear. However it seems that a combination of two related issues is relevant. As has been suggested, the peace process and subsequent significant withdrawals from large areas of Israel left much of the Religious Zionist camp confused and weary from a battle which they had lost. In addition a clear change was felt in the attitude of the secular community towards Religious Zionists. Traditionally, even amid deep political disagreement, there had always been a certain admiration and respect for the Religious Zionist community. Many of the secular leaders, including ardent political opponents, had publicly acknowledged the idealism, pioneering spirit and readiness to sacrifice which was displayed by the Religious Zionists, a spirit which they possibly missed in their own supporters. By the 1990s this esteem had contracted and been replaced by a widespread accusation that the settlers - **and by extension the whole Religious Zionist movement** - was responsible for the collapse of the Oslo Accord and the peace process in general. With the help of the media and other manipulators of public opinion, the settlers had become a loathed minority responsible for all of the

country's evils. The murder of Prime Minister Yitzchak Rabin in 1995 by ostensibly a Religious Zionist, served to fuel this feeling and to intensify the antipathy felt towards the settlers (those people who had, for chiefly for Zionist ideological reasons, made their homes in the newly-acquired territories), *Gush Emunim* and the whole of Religious Zionism (Gopin, 1998; Bloch, 1996). The facts that Yigal Amir (Rabin's assassin) wore a black *kippa* (and not a knitted *kippa sruga*), lived in the affluent mostly secular town of Herzliya (and not in a West-Bank settlement) and did not identify himself with the Religious Zionist camp, did little to change this public image.

Arguably it was hard to remain complacent in the face of both of these developments (the crisis generated by the withdrawal from Sinai and the transition from admiration to antipathy) and major sections of the Religious Zionist movement - particularly its younger generations - have indeed moved either 'left' or 'right' both in terms of religious stringency and in terms of the ideological zest for Jewish sovereignty over the entire Land of Israel (Marx, 1988).

From *Chazara B'she'ela* to *Chardal*

The crisis of faith was not only limited to the dream of *Eretz Yisrael Hashlema* (the belief in the sanctity of the entire land of Israel and in the religious precept to settle the whole country). As has been suggested, during the same period there was a growing trend towards *Chazara BeShe'ela*⁸. This development perhaps more than any other is worrying for the leaders of the community and they stand before it in anxious helplessness. The process is not new and even in the short history of Religious Zionism, it has been a prominent aspect of the community's development

⁸The process whereby Orthodox people relinquish their religious convictions and choose to no longer observe the *Mitzvot*.

(Bar Lev, 1977). In the last twenty years however, the numbers of *Chozrim B'she'ela* have increased and the phenomena has become more socially acceptable (Sheleg, 2000). One area of life which has been identified as being critical to this process is the period of compulsory military service (three years for males and two years for females). Since the inception of the alternative *Hesder* programme, Religious Zionist conscripts had traditionally joined one of these units, combining active army service with *Talmudic* studies. The programme is run jointly by the army and various *Yeshivot* and although the actual time that a *Hesder* conscript serves is two years longer than the regular army service, it is important to understand that the programme entails a shorter period of active military service. In recent years there has been a noted shift away from the *Hesder* programme in favour of the regular, three-year conscription, frequently in combat units and especially in the various reconnaissance units and 'special forces' (Ringle-Hoffman, 1993). For many Religious Zionist soldiers this change represents an aspiration for ideological fulfilment as well as a chance to prove themselves to their secular contemporaries. Predictably for a certain percentage, leaving the religious nest and mixing with predominantly secular fellow soldiers has led to their secularization. Bar Lev (1977) suggested that as many as 20% of the Religious Zionist community 'leave the faith' and become irreligious and there is no doubt that for many of the young men and women this process is intensified during their period of military service. Long stints away from home, new friends combined with normative adolescent questioning and doubting results for many in the shunning of their religious backgrounds and opting for a more secular way of life.

Parallel to these processes of doubt and uncertainty there is also in operation a process of strengthening of faith and religious extremism, and an attempt amongst a

certain element of the younger generation of the Religious Zionist community to gain higher and higher levels of strictness and meticulousness in their keeping of the *Mitzvot* (Nehorai, 1996). This group within the Religious Zionist community (previously referred to in this chapter) has been termed *Chardal* – a synthesis of the terms *Charedi* (ultra-orthodox) and *Leumi* (nationalistic). Traditionally the *Charedi* (ultra-orthodox) community do not associate with the Zionist nationalistic aspirations and the term *Chardal* indicates an ultra-orthodox attitude to the keeping of the *Mitzvot* together with a fervently nationalistic perspective on the State of Israel. Notwithstanding the play on words, it is important to emphasise the **differences** between the *Charedi* and Religious Zionist communities. Although in recent years the *Charedim* appear to have adopted a somewhat pragmatic approach to the State and its various organs of power, on an ideological level they emphatically **do not** see themselves as partners to the Zionist dream. Separatism is still a fundamental value and their fervent efforts to guard their communities from Western influences as for instance in their dress code, bear witness to their isolationist ideology. Although the *Chardal* elements within the Religious Zionist community are keen to adopt the traditionally *Charedi* stricter outlook regarding the observance of the *Mitzvot*, they shun the ideological stance which the *Charedim* hold regarding the State of Israel arguing the very opposite - that the modern State of Israel is a key component of the Jewish religious dogma.

These two developments (on the one hand elements within the Religious Zionist community who are strengthening their religious beliefs and practice and on the other hand growing numbers of the community who are ‘leaving the faith’) are occurring simultaneously. An example might be that in a small village or neighbourhood the youth might be in part searching for greater levels of religious stringency notably in their levels of modesty, piety and sincerity in prayer, the keeping of strict divisions

between the sexes, and in increased *Torah* learning, whilst in the same village or neighbourhood one would not be surprised to find other youngsters of the same age who still consider themselves to be religious but who appear to be stretching the letter of the law to its limits in the same areas that are listed above. Moreover, there may be a third group who no longer identify themselves as being Orthodox. Arguably, all of these groups are responding to tensions and conflicts in their lives and for many the conflicts and tensions are not necessarily personal or family-based but are directly related to issues facing the Religious Zionist movement as a whole.

Yoav Sorek, a prolific writer in this field sees the Religious Zionist educational system as being largely responsible for what he refers to as 'the crisis of *Chazara B'she'ela*' (Orthodox people who opt to relinquish their religious convictions and to no longer observe the *Mitzvot*). In a seminal article entitled 'Revolutionizing Religious Life' (Sorek, 1988) he asserts that for the vast majority of students their religious outlook becomes watered down as soon as they leave school. Even if the *Mitzvot* are still basically adhered to, Sorek suggests that religious fervour and zeal are all but lost. What he refers to as the love of *Torah* and the passion of *Torah* study seems to play a minor role in the adult lives of those who were educated in Religious Zionist schools. What is the difference, Sorek challenges, between the daily life of the believer and the non-believer? It seems clear that he is not referring to adherence to the basic religious obligations (although here too there is room to question) but to the atmosphere of a religious home, the enthusiasm and excitement of leading an orthodox religious lifestyle.

The fourth option

A further theme in the development of the Religious Zionist community is connected to the close living and working proximity between the Religious Zionist community and its secular neighbours.

For a certain sector of the Religious Zionist community there exists an ongoing process whereby the limits of acceptable behaviour are constantly being stretched and expanded. That which today is seen as being acceptable would, in the not too distant past, have been seen as religiously risqué or indeed behaviour associated with a non-religious life style (Scheffer, 2000). The important issue here is that for this section of the Religious Zionist community there is no inherent contradiction between these activities and a religious identity and self-definition as a religious Orthodox Jew.

A major example is the issue of leisure and recreation. In the Modern Orthodox world there has always been a tendency to participate in certain secular cultural and recreational pastimes but this pleasure-seeking self-indulgence (which is how it is viewed by the ultra-Orthodox camp) has tended to have been legitimized under the pretext of high culture. Furthermore, the acceptability has traditionally only stretched as far as secular music, theatre, cinema and television, and even in these areas there has always been a varying degree of censorship (Sheleg, 2000). The recent trends, especially in the younger generation, have placed the secular leisure culture of pubs and night-clubs within the borders of acceptability (Scheffer, 2000). The conflict is clear and whilst the majority of the frequenters of these establishments would not dream of eating the *non-kosher* food that is served on the premises they do not see the pub or the night club itself as any kind of compromise of their religious beliefs and principles. Again it is vital to emphasize that the transformation is not that

youngsters from religious backgrounds are frequenting these establishments, but that in doing so they do not see themselves as compromising their religious values or beliefs.

Another example is the participation of young men and women from the Religious Zionist community in weekly folk dancing clubs (Sheleg, 2000). The issue of mixed gender dancing and particularly that which involves physical contact is, in terms of the Orthodox code of behaviour, clearly problematic and yet it appears that these young men and women have found their own legitimization - as opposed, for example, to legitimacy from the Rabbis who would clearly prohibit these activities. Once again what is significant here is that these people consider themselves to be Orthodox: the men wear *kippot* and in general they are particular regarding the laws and commandments concerning *Shabbat* and *Kashrut* (dietary laws). However they have built for themselves parameters of behaviour which meet their own needs even if they are at odds with the strict letter of the law.

On examination it appears that there are countless examples of such activities. The dress code of married women is a further case in point, especially with regard to the religious requirement for Orthodox married women to cover their hair. In a different area of life there has been a recent trend for the post-army Religious Zionist youth to emulate their secular contemporaries in backpacking treks in the Far East (Fireisen, 2000). Once again the possibilities of keeping *Shabbat*, *Kashrut* and the requirement to pray with a *Minyan* (a quorum of ten Jewish males over the age of thirteen) are minimal.

One of the most intriguing examples of this phenomenon is the *Tephillin* date. *Tephillin* or phylacteries are the small black boxes containing passages from the Bible which are worn every weekday morning during *Shacharit* – the morning service. A *Tephillin* date is when a young man brings his *Tephillin* with him on a date

presuming that he will spend the night with the young lady and will hence need his *Tephillin* for the *Shacharit* service the following morning. In Orthodox Judaism any kind of physical contact between the sexes before marriage is totally forbidden and sexual relations before marriage are clearly and absolutely prohibited. The contradiction is blatant and even shocking and yet the phenomenon is apparently widespread enough for it to be nicknamed and identified.

In the past when confronted with a conflict between desired behaviour and religious principles, an individual was faced with three options: To forfeit the behaviour; to continue the behaviour whilst recognizing that it was placing one outside of the Orthodox fold, or in certain circumstances to search for a *Psak Halacha* (a Rabbinic edict) permitting the specific behaviour concerned. In recent years it seems that for certain elements in the Modern Orthodox community, including from within the Religious Zionist sector, a fourth option has developed which might be described as the denial or repression option (Scheffer, 2000). In this option one can carry on the desired behaviour whilst not relinquishing one's identity as an Orthodox Jew.

Since ostensibly the above examples indicate a degree of acquiescence to an artificial or fictitious situation, it is fair to presume that a certain price is being paid for the convenient denial/repression option and that the various behavioural patterns and activities previously described might well result in an inner feeling of discordance or dissonance which might in turn lead to internal conflict and tension.

Recent research by Eli Shechter (2000) has suggested an additional far-reaching psychological explanation for this phenomenon which delves beyond the realms of repression and denial. Shechter suggests that the trend should be seen in terms of identity structure. He claims that Eric Erikson's (1959) classic understanding of identity which provides a structure of continuity and internal consistency and which

is innately troubled by dissonance and internal contradiction, is not necessarily relevant to the modern era. He cites several post-modern theoreticians and in particular Robert Lifton (1993), the American psychiatrist who suggests that since today's cultural environment changes at such a rapid pace, the construct of identity has in turn become a more fluid structure capable of a much greater degree of flexibility. The result, according to Lifton, is that 'modern man' favours partial, fragmented values and ideologies as opposed to all-encompassing belief systems which command integrated, stable and durable responses to the challenges of the modern world.

It is interesting to note that most of the examples have become evident over the last fifteen years and arguably they represent a critical change in the make-up of the Religious Zionist community. Although the implications of this adjustment are as yet hard to discern, it is clear that ambiguity in the realm of religious boundaries can create tension, conflict and confusion especially amongst those young people whose religious identity and conviction is not yet steadfast or stable.

Religious or Zionist?

Significantly it seems that of the two axes which bond together to create the ideological framework of Religious Zionism, the Zionist aspect is more steadfast than the religious aspect. Although there are, as yet, no statistics to bear out this assumption it does seem apparent that there are a greater percentage of youngsters who are relinquishing their religious conviction than those who are abandoning their Zionist ideology and, for example, leaving Israel.

Additional recent significant trends

Contiguous to these structural developments, other transformations, equally important and far-reaching have recently become evident in the Religious Zionist community.

A woman's place...

The role of women in the Modern Orthodox Jewish world is one such area of transformation (Bar Lev, 1995). In tandem with general global trends, the role of women has become a focal point of discussion, change and development. In the Religious Zionist community the examples are countless, but salient points are a revolution in women's *Torah* learning. Thus the last twenty years have seen the establishment of many *Midrashot* or *Yeshivot* for women. Women are even being accepted, after a rigorous period of Torah study and training, to be *Toanot* - a form of barrister in a religious Rabbinical Court (Israeli Ministry of Social Services website – www.shil.haifa.ac.il/develop/hebrew/family, accessed on 03/01/04)

Perhaps the most interesting and cutting edge example is *Yedidya*, a Synagogue in Jerusalem where the women of the community are constantly searching to stretch the limits of the *Halacha* (Orthodox Rabbinic tradition) whilst remaining within its boundaries (official *Yedidya* community website, www.yedidya.tripod.com, accessed on 19/12/2003). The women convene their own *Minyan*; on certain festivals they take a turn in delivering a summary of the weekly Torah reading during the *Shabbat* morning service; and controversially, although still within the limits of the *Halacha*, they carry the *Torah* Scroll around the *Ezrat-Nashim* (the women's section of the Synagogue) when it is taken out of the Ark on *Shabbat* or festivals. The *Yedidya* 'experiment' is interesting in itself but it seems that it represents yet another example

of the conflict felt within certain elements of the community - the desire to be part of a western cultural revolution regarding the place of women in society whilst remaining within the fold of Orthodox Jewry.

A revolution in learning

Another area which has been affected by this process is a critical change in *Torah* learning itself (Scheffer, 2000). Certain Rabbis (all from the Religious Zionist movement) have introduced secular disciplines such as archaeology, botany and zoology into the *Yeshiva* study hall in particular with reference to the study of the Bible (the written law - as opposed to the oral law). It would be fair to presume that the next stage in this development would be the area of biblical criticism, which although clearly on a similar path is far more contentious and controversial. The application of secular academic tools in the study of holy texts is, from a religious perspective, both illegitimate and profane, however some rabbis - once again, from the Religious Zionist camp - have shown a willingness to engage some of the issues whilst vigorously refuting the solutions tendered by the secular Bible scholars (Sherlo, 1997). An example can be seen in the first two chapters of Genesis which offer slightly different versions of the Creation narrative. Secular Bible scholars have suggested a range of explanations such as multiple-authorship or the insignificance of the inconsistency due to the parable status of the narrative. Rabbi Breuer (1960) has suggested that it is not only legitimate to question this apparent anomaly but critical to our understanding of the Creation of the world. His explanation however differs from those mentioned and falls well within the limits of Orthodox principles when he explains that the disparity comes to highlight different aspects of the same story and is a biblical tool used to widen our perception of a convoluted and complex narrative.

“Not with valour and not with might but with my spirit says the Lord”

A further new development in the Religious Zionist movement is the *Mechinot Kdam Zva'iot* (literally the pre-military academies). These academies, the first of which was set up in the late eighties, offer young men the opportunity to spend a year in full time *Torah* study in a *Yeshiva*-like institution - after completing their high school and before their conscription. It is hard to overstate the significance of these academies and the impact which they have had on the Religious Zionist community and even on Israeli society at large. Furthermore, a true appreciation of the phenomenon of the *Mechinot* is critical to a clear understanding of the complex, tension-fraught world which is the Religious Zionist community in Israel today.

The *Mechinot* have created a framework whereby the young men from the Religious Zionist community can serve a full three years in the army but without entirely neglecting their religious studies. However, the initial agenda of the founders of the *Mechinot* was somewhat broader (Sadan, 1981). They had identified a weakening in the religious and spiritual steadfastness of those Religious Zionist school leavers who were not interested in the *Hesder* programme, and in response they developed a curriculum and learning programme which clearly centred around and emphasised issues of Jewish faith and religious identity. The *Mechina* Rabbis endeavoured to strengthen the faith of these young men so that the previously alluded to ‘threat of secularization’ during the three-year compulsory service would be minimised. Although these aims can be clearly comprehended on a micro level of the individual soldier and possibly on the level of the Religious Zionist camp as a whole, the founders of the *Mechinot* also had a much wider, macro agenda. The pioneers of the *Mechinot* - Rabbis such as Eli Sadan and Yigal Levinstein - felt that the Religious Zionist camp had deserted and forsaken the army and, with few exceptions, had not attempted to create a Religious Zionist presence in what is one of the key areas of

Israeli life (Ringle-Hoffman, 1993). One of the reasons for this apparent abandonment is that due to the relative brevity of the period of actual active service in the *Hesder* programme, the option of officer training (the only realistic path to promotion and advancement in the army) was effectively closed. Rabbi Sadan (1981) noted that more and more youngsters were choosing to carry out a full three-year active service so that they would be eligible for officer training and promotion and hence he decided to build up and strengthen these conscripts as much as possible in a single year of intense study before their service began. The learning centred around the realms of *Emuna* (spiritual faith) and *Chizuk* (strengthening of religious ideals). This agenda had two important effects on the daily curriculum. Firstly, the *Mechinot* broke with the ancient tradition of centring academic religious studies on *Talmud* and instead focused on various texts which would help the young men strengthen their belief and their religious ideology. Secondly a heavy emphasis was placed on educating to excellence and on fulfilment of potential. Here role model education was a critical tool and there are many cases of specific Rabbis having a deep and intense impact on the lives and development of these young men.

In quantitative terms and in reference to the objectives listed above, the *Mechinot* have been remarkably successful (Ringle-Hoffman, 1993). The army today is replete with religious soldiers and officers (again, almost entirely from the Religious Zionist camp) often in combat brigades and special units. Whereas twenty years ago a *kippa* was an unusual sight in many of these units and unheard of in others, today up to thirty or forty percent of the soldiers in any one of these units will be religious. There are no areas left in the army and in the defence community at large where the Religious Zionist camp is not represented in both large numbers and high rank. The *Mechinot* have become very popular amongst Religious Zionist school leavers and today there are more than twenty such academies around the country. The army too

has noted this change and according to comments by high ranking officers the army sees the graduates of the *Mechinot* as strong potential for officer training school and further promotion within the army hierarchy (Ringle-Hoffman, 1993).

“The hills are alive ...”

Recently the political situation has led to the revelation of yet another style of Religious Zionist – the *Noar Hagv'aot*, youngsters who defend the small agricultural outposts and homesteads which the government for a variety of reasons has told the army to dismantle (Scheffer, 2000). Although on a daily basis the one or two shanty caravans or huts, often on a barren hilltop, will be home for only a handful of youngsters, under the threat of demolition, within hours hundreds of youth (all from the Religious Zionist camp!) will converge on the hilltop to present the army with passive resistance. This more often than not includes some pulling and shoving and high-level emotional outbursts. The central issue is the desire to protect the Land of Israel, to ensure Jewish sovereignty over the land and the right of the Jewish people to live on that land. However, yet again the Religious Zionist camp finds itself in conflict. It is confronted by two ideals which contradict each other and leave only emotional confusion and frustration - a passionate love of the land and unwillingness to give up ‘even one centimetre’, and a deep sense of dread at the prospect of a hostile confrontation with the army. On an ideological level, there is the comparable dread of needing to disobey a law of the state. The media, in its coverage of the dismantling of the outposts - perhaps unintentionally - revealed the existence of this new group who are identified by their large knitted *kippot*, long hair and a slightly dishevelled look and who spiritually seem to be searching for a higher plane. Although from their outward appearance this group appear to be not dissimilar to

countless groups of spiritually searching youngsters dotted around the globe and particularly in the Far East, the *Noar Hagva 'ot* are basing that search totally on their interpretation of the tenets of Religious Zionism. Rabbi Ya'akov Meidan (2002), an influential Religious Zionist rabbinical figure, has described the youngsters as:

“... searching for a boundary-free experience, a lifestyle devoid of limitations... They are searching for freedom, freedom from the bounds of society, in settlements which have been set up without the requisite legal requirements, with no fence and no clear boundaries. Here they can lead a life that has no clear boundaries and without requisite legal limitations regarding the type of smoke that they inhale into their lungs or the liquids which they drink”. (Meidan, 2002, p.55)

He goes on to warn against generalizations and points out that his depiction is probably only relevant to a minority of the youngsters involved. However the fact that he is prepared to print such a view is indicative of the concern and alarm of the community's leadership regarding this new development.

The individual vs. the community

A key element which differentiates this new brand of Religious Zionism from its many predecessors is the desire for individualism in general and specifically individual religious expression (Amital, 2000). This transition from the community's almost herd-like dynamic to the prominence of the individual is particularly conspicuous (and public) at wedding festivities (Scheffer, 2000). At Orthodox Jewish weddings, dancing is always a particularly fervent expression of the happiness of the occasion. The dancing is centred on the bride and groom and typified by concentric rings of dancing in a circle, hand in hand and with a very strong element of unity of movement and beat. The result could be hundreds of people dancing together with the same action in the same direction and all focusing on the bride and groom. In

recent years the middle-aged generation have noted, often with surprise and possibly shock, a new style. The youngsters referred to above have developed for themselves a new mode of wedding dance. Hands are no longer linked, the dance steps are no longer standard or uniform and one could colloquially say that 'everyone does their own thing'. The individuality is overt and in stark contrast to the strong uniformity of dance seen until now. It would be erroneous to ignore the significance of this change. Weddings and similar occasions are rare opportunities to observe the developments of such trends and although it is unwise to generalize and hazardous to attempt to identify long-term transformations, a clear change has occurred and is quite possibly continuing to gather strength in both size and significance. It is also plausible to presume that the trend to individuality is a response to tensions and conflicts among Religious Zionists and for which the community and its leadership do not appear to offer satisfactory solutions. Any dilution of the strength of the group must have an impact on the support that the group can offer an individual in time of need.

Conclusion

To conclude, Religious Zionists form a section of the Orthodox Jewish population of Israel. They incorporate within their ideology an Orthodox lifestyle together with a divine belief in the Land of Israel as the historic and modern-day Homeland of the Jewish People.

Religious Zionists spans a huge range of ideological convictions and religious beliefs and yet the community is bound by the tenets of Modern Orthodoxy blended with a broad Zionist ideology. It is a community which exhibits high levels of ideological commitment together with impressive traits of charity and benevolence. To a certain extent the Religious Zionist movement is seen as one of last remaining ideological

components in the wider Israeli society which often regards itself as self-centred and mirroring the less desirable elements of the modern Western democracies (Ringle-Hoffman, 1993; Gal, 1996).

The development of the Religious Zionist community over the last fifty years can be crystallized into the parallel and interdependent processes of the search for synthesis and the responses to conflicts and tension. In addition, a salient feature in the development of the community is the speed at which the development process is taking place. The rate of change, the number of different events and responses to events and the sense of fluidity within the community reveals on the one hand its dynamism but on the other hand a degree of instability. An associative metaphor is the archetypal instability of the adolescent. He too is searching to find his way, is constantly changing and developing and his reactions have a tendency to be radical and extreme, only later to be moderated into more balanced, adjusted responses.

The intrinsic conflicts which are fundamental to the make-up of the Religious Zionist community have had the dual impact of forcing a level of creativity and dynamism whilst also creating tension and associated frustration and dissatisfaction (Sheleg, 2000). For many the confusion and frustration touch basic life issues. When a man of faith is unsure as to what his Maker requires of him, the existential conflict is extremely powerful and often all-encompassing. This in itself might help to explain the intense disagreements, the extreme responses, and the radical actions which have accompanied the development of this community from its inception. In addition, the Religious Zionist way of life also incorporates the conflicts and dilemmas of the Modern Orthodox Jewish world. Here too the demands and restrictions are often bewildering and can clearly create tension. One small example can be found in the

Bnei Akiva youth movement. On the one hand the movement is strictly Orthodox and therefore physical contact between the sexes is forbidden, and yet all the movement's activities are mixed. Within this environment it is generally acceptable, for example, to sing secular folk songs including those whose content concerns love, passion and desire and yet such feelings are not encouraged outside the framework of marriage. This dichotomy is yet another area of potential conflict and confusion in a society within a society which is the Religious Zionist camp in modern-day Israel. The results of the searching, the conflicts and the uncertainty have been reviewed in this chapter: *Chazara B'she'ela* alongside increased religious devotion and observance; the struggle over the outposts alongside the emphasis on *Kibbush Halevavot*, the meteoric rise of the *Mechinot* alongside the recent emergence of the *Noar Hagva'ot*.

Radical reactions to extreme challenges; momentous responses to complex questions.

Chapter Four

The Semi-Structured Interviews

A Thematic Qualitative Analysis

Introduction

The present study combines both qualitative and quantitative elements. The qualitative interviews were used to develop and clarify the research questions whilst the quantitative questionnaires enabled a statistical analysis of the topic.

Since the Religious Zionist community in Israel has seldom fallen under the scrutiny of scientific research it was felt prudent to preface the quantitative work with qualitative semi-structured interviews enabling the development of the survey questions and the fine tuning of the questionnaires to the precise requirements of the study.

The qualitative section of the research was aimed at providing insights into social phenomena. The interviews were designed to provide in-depth information on how the participants see the world with reference to the research questions but they did not purport to offer a representative picture of the community (Elliot, 1995). This part of the research was therefore, by definition, of an exploratory nature. Although other methodological modes demand high levels of representative probability sampling, when using qualitative methods the number of participants is determined by conceptual saturation and not by a predetermined statistical assessment (Elliot et al., 1999). Notwithstanding, the information gained from the modest sample size

should be viewed as being suggestive of the possible varieties of belief within the Religious Zionist community.

The use of qualitative techniques when observing religion and harsh life events is not new. The understanding that a sensitive, interactive in-depth interview can reveal information which would be hard to glean from a dry, formal questionnaire has been the basis of several major studies. Bulman & Wortman (1977) for example, examined victims of spinal-cord injuries, and through qualitative techniques observed how their belief in, and relationship with G-d was significant to how they coped with the tribulations resulting from their injury. Similarly, Jenkins and Pargament (1988) carried out qualitative research with sixty-two patients who had been diagnosed with cancer, showing that although in general cognitive appraisals appear only to be 'modest' predictors of adjustment, the primary appraisal of a perceived life threat is negatively correlated with positive adjustment.

A primary aim of the qualitative section of the research was to map some of the key aspects of the relationship between suicide, coping and religiosity within the Religious Zionist community in Israel. A further goal was to highlight the possible range of connotations of religious self-definition with reference to coping. Furthermore, the qualitative methodology was felt to be pertinent for assessing the range of opinions regarding suicide acceptance. With these aims in mind, the researcher developed a series of questions which served as a framework through which the relevant information could be gleaned.

Method

Participants

Although the sample in the present research was not intended to be statistically representative of the Religious Zionist community, an effort was made to reach a broad and diverse range of participants – particularly in reference to geographical and geo-political location, age (within the 18-24 age-bracket), gender, life experience, and religious identity. Twenty participants were chosen according to the above criteria. The participants were recruited through the researcher's acquaintances or colleagues. The acquaintances were asked to introduce the researcher to people they knew who fitted in with specified requirements. The result was that the participants themselves were not previously known to the researcher.

Of the twenty participants, two requested not to continue the interviews (one felt unwell and the second felt uncomfortable in answering the questions as she was not clear as to how she felt about the answers). Of the eighteen remaining participants, ten were male and eight were female. Twelve were aged 18-21 and six were aged 22-24. Eight of the participants were involved in some sort of full-time religious studies programme before going to the army or voluntary service, whilst the remaining ten had completed the army or voluntary service. Of these ten, five were university students, four were working full-time before embarking on some sort of higher education and one was "in an in-between stage and not doing very much with his life at the moment". Only two of the participants were married and of the remaining sixteen, six were living with their parents and ten in student accommodation.

For a discussion of the ethical issues regarding the research refer to chapter five (p.159).

The Interviews

The interviews were open-ended but the questions were always asked according to the following basic configuration:

- For you, what does it mean to be religious?
- How do your religious beliefs affect your every day life - on both a personal and a national level?
- Do your religious values help you cope with stressful or troublesome life events?
- Do you think your religious beliefs help you cope with life and death issues?
- Do you think that there are any circumstances when suicide might be acceptable?
- When you hear that someone has committed suicide do issues of religiosity affect how you view his/her actions?
- If you were ever in a state of despair, do you think that your religious beliefs would help you cope?
- Have things ever got so bad that you have considered harming yourself in some way? Could you tell me about this?
- Do you think religion influences how people feel about suicide?

Occasionally the order of the questions was changed as a result of the participant's replies and the way in which the interview developed.

The questions were derived from a basic understanding that within the Religious Zionist community of Israel, people's levels of religiosity are intertwined with their political opinions and their nationalistic perspectives. The questions aimed to raise these subjects in conjunction with issues connected to coping with harsh life situations. The questions were chosen in order to review the participant's understanding of his/her own religiosity and the interface between his/her religiosity and significant areas in his/her life. In addition the questions were designed to lead the participant to a discussion of how his/her religious outlook is related to his/her ability to cope with harsh life situations.

As was suggested in chapter three, political and nationalistic topics are central to the Religious Zionist community. The religiosity of members of the community includes what might be construed as political views by the non-religious sector. Also what might from a secular viewpoint be considered a secular political topic is, to the Religious Zionist an issue of religious belief. Thus a country's borders are not only defined by politicians and generals but are divinely dictated in the *Torah*; settling a hilltop becomes a religious obligation, and living in a specific area, a G-d given right. For this reason, it was felt prudent to try and understand the question of religiosity whilst looking at the interaction with these broader, far-reaching issues.

The interviews also included questions concerning how the participants coped with harsh life situations. Included here were questions regarding religious coping and the option of suicide as a response to harsh life situations.

The researcher regards himself as a Religious Zionist and identifies himself as a member of that community. Although this cultural-religious matching of interviewer and interviewees has clear advantages (in particular allowing for a clearer understanding of the participants' responses), the enmeshment also raised potentially problematic issues regarding neutrality, the possibility of leading questions or even partiality. A specific area which needs to be noted is the researcher's view that the vast majority of religious participants can identify at least one set of circumstances whereby suicide is acceptable. During the interviews, when participants suggested that in no circumstances was suicide acceptable to them, the interviewer may well have delved further than was reasonably acceptable in order to reveal a set of circumstances where they would in fact accept the suicide option. An example was in interview 16:

“Interviewee To be honest I can’t think of any situation when I would be able to justify it – even awful situations like prisoners of war or painful illnesses. It’s just not logical. I even remember reading about euthanasia and thinking this isn’t logical.

MB So there is absolutely no situation?

Interviewee No not really.

(Pause)

Interviewee Well may be if it was really really bad.”

The qualitative style of research provided useful insights into the range of beliefs held by the members of the Religious Zionist community. In addition it enabled careful investigation of delicate issues, allowing for the disclosure of sensitive information which might have been neglected if more formal means of enquiry had been employed. One example was when the interview related to the participant’s own suicide thoughts. The developing relationship between the interviewer and each participant allowed the interviewer to carefully ask sensitive questions which revealed information which was crucial to the research:

“M.B. Have you ever been in a situation when you have thought about harming yourself?

(silence)

Interviewee Yes.

M.B. Could tell me about it or would you rather that I left it?

Interviewee It wasn’t a specific event but a really bad period in my life.”

(interview 6)

“Interviewee There were times when I came to think that there were no good answers to all these questions and therefore there wasn’t a lot of point in living.

MB So it was a kind of philosophical crisis?

Interviewee Yes you could put it that way.

MB Whilst this was going on did you ever think about the *Halachic* aspects or did being religious have any bearing on what was going on?

Interviewee I can genuinely say that I don’t remember making any kind of connection between me being religious and me dealing with this issues - I suppose that’s a bit strange but that’s how it was.”

(interview 13)

In general the interviews were structured according to a *funnelling design* (see Smith, 1995). The opening questions centered on religiosity and coping as it was felt that these questions were on the whole easier to answer (Patton, 1990). In the event, this was not always the case and several of the participants expressed difficulty in answering the initial question “For you, what does it mean to be religious?”. The interviews progressed to a more personal inquiry of suicide acceptance and ideation. Here the participants were not only questioned as to their theoretical attitudes but were encouraged to share *personal* narratives and asked to reflect on their experiences. The rationale was that in order to touch on these delicate issues some measure of rapport would have to be built up between interviewer and interviewee and the general questions would give the interviewer an opportunity to communicate a certain level of empathy, hopefully placing the interviewee at ease and giving him the confidence which would allow him to share his experiences.

The interviews consisted of a loose but standard structure of open-ended questions of a clear but neutral nature (Patton, 1990). The questions defined the area to be explored but allowed the interviewer to digress and pursue a certain idea or response. To facilitate this, *probing questions* were introduced such as “Can you tell me more about that?” or “Is there anything else?”

All the interviews were taped, translated (from the original Hebrew) and finally transcribed after which the translated data was subjected to *thematic qualitative analysis* (Leininger, 1985). This is an evaluation technique which allows the researcher to extract from the interviews the underlying themes, sifting out the extraneous material from the significant and noteworthy. A distinct effort was made to approach the data from a non-judgmental perspective, allowing the significant themes to emerge from the data itself rather than from the researcher’s

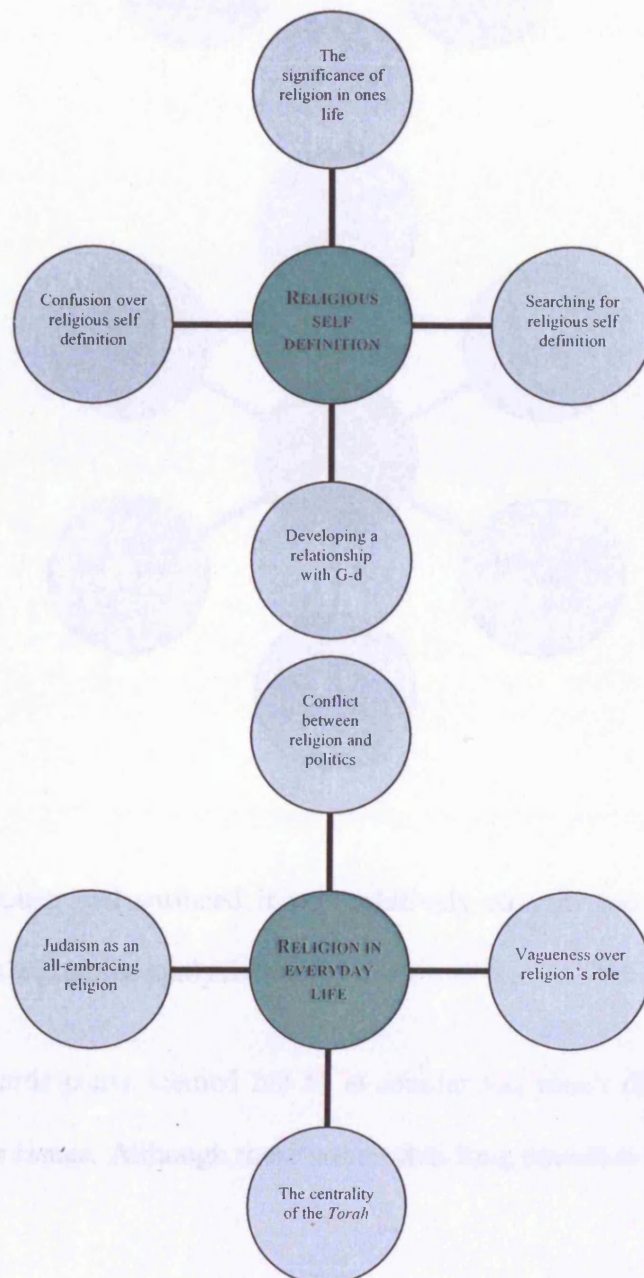
preconceptions (see Cinnirella & Loewenthal, 1999). Although this approach which is rooted in the *grounded theory* (Glaser & Strauss, 1967) might appear to be an obvious precaution when using such a methodology, in practice it proved to be a complex task and only numerous readings of the original data allowed for all the relevant information to be gleaned. A further level of reliability was gained by requesting a neutral examiner (a sociologist who is presently involved in research which involves qualitative analysis) to read through the raw data and to highlight the central themes. The use of an 'additional analytical auditor' (Elliot et al., 1999) provides an extra credibility check which is particularly relevant when scientific reliability models are not available. Only themes which were identified by both the researcher and the independent examiner were included in the analysis, and the high level of agreement between the two readers is a possible indication of the clarity of the interview responses and an encouraging indication of the reliability of the technique. The researcher and the neutral examiner disagreed on two themes (suicide and guilt and the centrality of Israel) and as a precaution, both of the themes were discarded. Although it might have been possible to reconcile the lack of agreement, ultimately it was felt important to err on the side of caution and only to include the themes on which full agreement was found. In addition it was noted that both of these themes were in some way incorporated in other themes on which there was agreement.

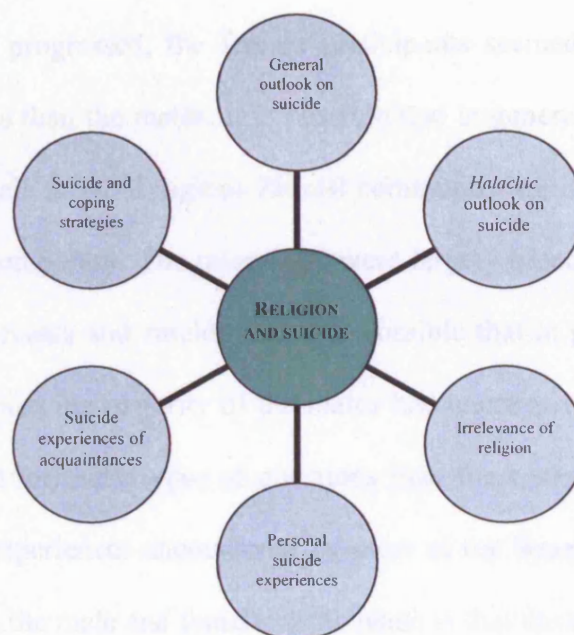
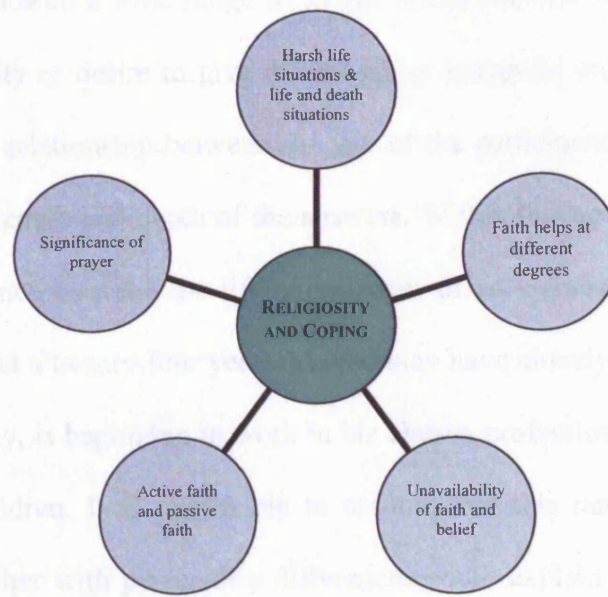
Sixteen interviews were carried out after which an initial thematic analysis indicated that certain themes, issues and attitudes were emerging from the data with a significant degree of regularity. Although it was felt that a marked level of saturation had been acquired, four more interviews were carried out as a safety measure in order to be certain that the majority of the options had been covered. After eighteen interviews, it was decided that a sufficient sample size had been reached.

The data from the interviews were evaluated according to the protocol of thematic analysis (Leininger, 1985). After the basic themes had been defined and identified, the next step was to combine and catalogue the data into sub-themes. Sub-themes are defined as units derived from the original basic themes (Taylor & Bogdan, 1984).

In the present research there were 4 sub-themes: Religious self definition; Religion in every-day life; Religiosity and coping and Religiosity and suicide.

The following diagrams highlight the 4 sub-themes (coloured in green) and the basic themes which were associated with them (coloured in blue).





Once the sub-groups had surfaced it was relatively easy to see the emergence of different patterns within the analysis.

In general the participants seemed not to encounter too much difficulty in talking about the various issues. Although there were often long pauses it was felt that these

were indications of deep thought rather than 'resistance' or difficulty in answering. The interviews showed a wide range in length which was usually a function of the participant's ability or desire to give discerning or insightful answers. Often it was possible to see a relationship between the age of the participants (within the 18-24 bracket) and the length and depth of the answers. Within this age bracket there is an enormous difference between the life experiences of an eighteen year-old who has just left school and a twenty-four year-old who may have already served as a combat officer in the army, is beginning to work in his chosen profession and might even be married with children. It is reasonable to assume that this range of different life experiences together with personality differences could explain the variation in the length and depth of the responses.

As the interviews progressed, the female participants seemed to be offering less insightful responses than the males. It is possible that in general the life experiences of the average female in the Religious Zionist community are less extreme or severe than her male contemporary. The interviews were largely based around questions of coping, harsh life events and suicide and it is possible that in particular the combat military service which the majority of the males had encountered, provided more of an experience base for these types of questions than the comparatively standard or conventional life experiences encountered by most of the females. A further critical difference between the male and female participants is that the majority of boys have spent some period in a *Mechina* or *Yeshiva*. These educational institutions often help students to hone their religious identity and beliefs and although some of the girls might have also attended a post-school *Torah* institution, the *Michlalot* (higher education *Torah* institutions for women) are more likely to be text based and without the heavy emphasis on lessons in belief, central to the curricula of the *Mechinot* and recently also of many of the *yeshivot* (Sheleg, 2000). These are, of course, stark

generalizations but even so, these two directions might help to explain the difference in the depths of the responses. Two examples are found in the responses of the female interviewees in interviews 8 and 9 to the question “For you, what does it mean to be religious?”

“So you have all these external issues of how you dress, how you speak etc. but it’s also about having religious texts on your bookshelf and saying *Shema* before you go to sleep.” (interview 9)

“I’ve never known anything else, it’s hard for me to say if I do something because I’m religious or because that’s just the way I am”. (interview 8)

These responses are notable especially when compared to a relatively typical male response such as that in interviews 2 and 1:

“It means that I believe in G-d. I believe that He is the cause of everything and everything in the world happens because of Him. It means that I believe that nothing in the world or in our lives happens by chance – everything has a purpose. And therefore my purpose in this world is to serve G-d, to make His Name holy and to learn the *Torah* which he gave to us. (interview 2)

“It means being part of something; it’s about truth, carrying out your life according to the truth. It means living life with a clear understanding that you are living the best, most ideal way. All the obligations and things that you have to do, they are all clear to you and you understand why you are doing them”. (interview 1)

A further explanation might lie in the fact that all of the interviews were carried out by a male interviewer. It is quite possible that with reference to the female interviewees this represented an obstacle of some sort. It has been suggested that matching of interviewer and interviewee on salient characteristics (in this case gender) may enable the interviewee to feel better understood, and to be more forthcoming. A more detailed discussion of interviewer gender matching can be found in chapter eight (page 217) but in general although it might have been

preferable for a female researcher to interview the female participants, the research was limited in that it proved hard to find a female researcher who possessed both clinical skills and was of a similar cultural/religious background to the interviewees **and** who was prepared to give up many hours of her time on a totally voluntary basis.

The existential and practical connotations of religious self-definition

In all of the interviews the first question related to how the participant saw him or herself religiously: “For you, what does it mean to be religious?”. All of the participants managed to relate to their religious self-definition: that is they were all able to discuss their own religious levels, the *Mitzvot* which they kept (and did not keep) and the strengths and weaknesses in their faith in G-d. Although there was a very wide range of responses, a common theme was the key role that being *dati* (religious) played in their lives.

The participants related to the questions about religiosity in several different ways. For the majority it was an opportunity to affirm their faith in G-d. These interviewees answered the questions with superlative comments about belief in G-d and the centrality and totality of His role in their lives. They expressed their conviction as to the absolute correctness of the *Torah’s* way of life and acknowledged the overall significance of *Hashem* in their lives:

“For me, it’s about believing that the way of the *Torah* is the best way to lead your life. It’s the truth and the *Mitzvot* lead us on the right path.” (interview 11)

Within this group were participants who highlighted the searching aspect of their religious self-definition. They stressed the centrality of the quest to understand what G-d requires of them:

“You have to try and work out what *Hashem* requires from you. Everyone has a role in this world and it is our job to work out what that role is. So in your every day life when you get up in the morning and you plan your day you must measure it against that yardstick and when you go to bed at night you have to try and assess how well or badly you have done. That is being religious.” (interview 14)

In addition around 30% of the participants stressed a more activity-based belief in which the keeping of the *Mitzvot* was the key element:

“From the first words of prayer that I say when I wake to the last prayers that I say before going to sleep and in between I am learning *Torah* or eating food whilst blessing G-d before and after, even after I go to the toilet I thank G-d for allowing my bodily functions to work properly. In short my religious belief totally affects my every day life.” (interview 2)

Conversely, nine of the participants spoke of their faith as specifically centering around a relationship which they had developed with G-d and a closeness which they considered to be central to their religious experience:

“..... it’s about speaking to *Hashem*, having a relationship with Him.” (interview 11)

“It’s what gives my life significance and most fills my life. It’s about having a relationship with G-d.” (interview 12)

This relationship perception can perhaps be seen as a more emotive outlook on religiosity in which feelings are more significant than actions. The difference of approach can be paralleled on a philosophical level to the landmark debate in the previous generation between Professor Yeshayahu Leibowitz (1903-1994) and Rabbi Avraham Yitzchak HaCohen Kook (1864-1935). Leibowitz argued that being religious is purely a function of observing the *Mitzvot*. Keeping the *Halacha* is the end as well as the means:

“Mitzvot as a way of life, as a fixed and permanent form of human existence, preserve religion as a goal in itself and prevent it from turning into a means for attaining a goal. Indeed, most of the Mitzvot have no sense unless we regard them in this manner, as an expression of selfless divine service. Most of the Mitzvot have no instrumental or utilitarian value and cannot be construed as helping a person fulfil his earthly or spiritual needs. A person would not undertake this way of life unless he sees divine service as a goal in itself, not as a means to achieve any other purpose. Therefore, the halacha directs its attention to one’s duties and not to one’s feelings. If Mitzvot are service to G-d and not service to man, they do not have to be intended or directed to man’s needs.” (Leibowitz, in Cohen & Mendes-Flohr, 1987, p.70)

Rabbi Kook, who is more in line with the traditional view of Maimonides, left much more room for emotive expression of one’s relationship with one’s Maker. He saw the keeping of the *Mitzvot* as a path towards spiritual perfection, the improvement of society and the perfection of the world. This deeper understanding of the role of the commandments is concisely paraphrased in Kook’s article ‘Letters of Holiness’:

“The light of the G-d of life, the light of the life of the world, lives in the complete harmony in the glory of every Mitzvah.”

(Kook, in Samson & Fishman 1996, p.182)

Samson and Fishman (1996) paraphrased Kook’s notoriously esoteric phraseology in the following way:

“A Jew cleaves to G-d, not only through abstract meditation, but through the performance of the practical Mitzvot as well. When we perform the commandments, we connect our lives to G-d’s will, and to the Divine life-force which he implanted in them. This is the path to true life, through cleaving to the Divine life-force in the Mitzvot”. (p.183)

At least six of the participants used the interview as an opportunity for introspection. Acknowledging the difficulty that being religious presented for them they candidly admitted their acceptance of an ideal whilst admitting their present inability to reach it:

“On a practical level it’s really hard and you often don’t manage it. If you manage to do it, then you have found your path for life. It’s the hardest thing in the world and I acknowledge that definitely I haven’t managed it.” (interview 14)

A possible sub-group here are those participants whose answers appeared confused and lacking in clarity. It is possible that the confusion of their response is a mirror of a general confusion regarding issues of faith and belief. In interview 15 for example the responses were particularly vague and yet a closer look at the content reveals a very real conflict regarding the fundamental roots of religious belief. This particular participant defines herself as religious and is particular in her observance of the *Mitzvot* and yet, she appears to hold quite serious doubts as to the source of her faith:

“It’s a way of life, it’s everything, it’s the way I am. I’ve never known anything else, it’s hard for me to say if I do something because I’m religious or because that’s just the way I am. There are all the *Mitzvot* and the *Brachot*, the way I dress etc. but it’s more than that ... It’s really hard for me to explain.” (interview 15)

Three of the interviewees mentioned the issue of responsibility as being central to their feeling of religiousness. The issue of responsibility appears to encompass several different factors. Some participants noted the responsibility they felt, as religious Jews, to represent G-d’s values on earth and therefore if one, in his behaviour, abandons these values in public he is creating a *Chilul Hashem*, a defamation of G-d’s name:

“Interviewee Firstly it’s much more than the technical aspects of keeping the *Mitzvot*. In the army especially, it’s even about whether or not you throw a cigarette butt on the floor. In the army much more than in civilian life you represent a way of life which is different. For me, having a *kippa* on my head means that I have to think about everything that I do – it’s a responsibility. It’s the smallest things like, I don’t know, turning off the light when you leave a room or how you wake someone up for guard duty – it’s everything.

MB Would it be correct to say that in the strictest sense the things that you are talking about aren't directly related to keeping the *Mitzvot*?

Interviewee That's just it; it's about moral issues - about being a decent human being, but for me that is being religious." (interview 10)

One participant took this responsibility a stage further, arguing that an essential element in his being religious was the personal responsibility that he felt towards bringing closer the coming of the Messiah:

"For me being religious is about believing. It's what gives my life significance and most fills my life. It's about having a relationship with G-d. But part of the answer to your question is my role in speeding up the coming of the Messiah and accepting that as part of my responsibility." (interview 12)

There were those participants for whom being religious meant having clarity of purpose and those for whose religious self-definition gave them a sense of belonging:

"It means being part of something; it's about truth, carrying out your life according to the truth." (interview 1)

As has been seen, the term 'religiosity' encompasses a vastly broad spectrum of connotations. The implications of religious self-definition for one Religious Zionist may be diametrically dissimilar to that of his neighbour. It appears that there are certain base-line functions which are common to all those that adhere to this self-definition such as a basic belief in G-d, Sabbath observance and the observance of the dietary laws. However, beyond these basic rudiments lies a range of belief and observance, all of which comfortably fit under the umbrella of Religious Zionism. As will be shown, the qualitative analysis seemed to raise the possibility that the **type** of religiosity or the emphasis placed on certain aspects of religious adherence may correlate with the part that religion plays in coping in harsh life situations and

ultimately in the buffer that religion does or does not afford when one faces the desire to end one's life.

A technical drawback relating to the qualitative nature of the study was an apparently common shortcoming which has been previously noted in related studies (see Cinnirella & Loewenthal, 1999). Although only avowedly religious people were interviewed, their actually being religious was somewhat taken for granted and at no stage was it measured in any objective fashion. The responses to the relevant questions to some extent indicated their level of religiosity or, for example, the extent to which religion was central to their lives, nonetheless an objective measure of religiosity may well have proved helpful in the analysis. This particular shortcoming invited the next stage of the research which included a complementary quantitative study based on calculable results and statistical analysis.

The next area of investigation was a natural extension of the religious self-definition question. It related to the part that religion plays in decision making processes and in the formation of attitudes regarding issues which may not be directly related to questions of faith.

The impact of religiosity on nationalistic and political standpoints

When the participants were asked to relate their religious beliefs to political or national issues, once again they expressed a wide range of views. On the one hand there were those who categorically denied any relationship between religious beliefs and political outlook and although this group was numerically a minority (28% of all the participants), their opinions were explicit and unequivocal:

“From my point of view, being religious doesn’t affect my views at all. If I were irreligious I think that I would have exactly the same views.” (interview 5)

“The *Torah* impacts on every sphere of our lives”

In contrast, the majority of interviewees (73%), saw a direct relationship between the two constructs. A seemingly unwavering belief in G-d and the truth of the *Torah*’s way of life implied for these participants a direct and even straightforward relationship between their attitudes to political and national issues (as well as to every other aspect of their lives) and their faith. Here both the general relationship between religion and politics was obvious, as was the more practical relationship indicated by the fact that their choice of political party before an election would be directly related to their beliefs:

“Here there is no question. I think that I view all the major questions through a *Torah* perspective. That is the way I make up my mind. For example, the *intifada* of the last three years. I see it very much as a religious issue which needs to be understood through the prism of faith and belief, or, if you prefer, through the prism of what *Hashem* is trying to tell us.” (interview 8)

“I will always be looking for a party which emphasises our national natural affinity with this country and which emphasises the Jewish essence or spirit of the State.” (interview 1)

“I would look for a party that I could trust to guard and look after my country. I see the whole history of the State as a religious process from before 1948. For 2000 years the Jewish people were waiting to return to their land and the State of Israel today is the physical expression of that return. I would look for a party that would mirror those kinds of feelings.” (interview 4)

It is interesting that whilst most of the interviewees who acknowledged the role that their faith played in the development of their political opinions expressed what are generally accepted as being right-wing views, one participant astutely pointed out

that the question is not one of pure politics and that if someone were to choose a left-wing party because of his religious beliefs then he too would be associated with this group. This view was reported both objectively as an opinion -

“The *Torah* impacts on every sphere of our lives. Now politically that can take you in either direction, either to the left or to the right; that isn’t the point. The point is that you have an outlook which is influenced by what you understand to be *Torah* values.”
(interview 4)

- and also by at least one of the interviewees in a statement of self disclosure:

“I’ve changed a bit over recent years and whereas I used to be very right-wing I have changed somewhat and now I see things more as a lefty. I still believe that the land of Israel was given to the Jewish people by *Hashem* and therefore we have a right to the land but I think that there is an issue of timing - about, for example, when to go to war to realize that right.”
(interview 13)

In general for these participants the option of a contradiction between religion and world outlook is not relevant because it implies a vacillation in their belief and as such is untenable. Such a position is in line with the traditional perception of Judaism as an all-embracing ethos. Maimonides (1135-1204), perhaps the most renowned of Jewish medieval philosophers, delineated thirteen Principles of Faith which were to become a canon of Jewish belief. The first of these principles highlights the all-encompassing nature of the Jewish Orthodox belief system:

“I believe with complete faith that the Creator, Blessed is His Name, creates and guides all creatures, and that He alone made, makes and will make everything”
(Maimonides, commentary on the *Mishna*).

One participant attempted to take the issue a stage further - discussing whether the impact of his religious belief on his political opinions was effective on a conscious or unconscious level. He suggested that if there was an influence then it was not

deliberate or intended but a function of unconscious influences analogous to the way that our upbringing or education affects our opinions and outlook:

“I can’t say that these issues are totally isolated from religion because it’s clear to me that everything is connected to *Hashem’s* plan and rationally I know that my opinions have been to a certain extent shaped by my family and my schools but even so, consciously I definitely don’t find myself thinking “what does the *Halacha* say about such and such”. In the first instance I think what **my** opinion is.”

(interview 10)

In a similar way a different interviewee highlighted the geo-political situation of where one lives as having a strong influence on how opinions are formulated. This particular interviewee lives in a small settlement very close to the Arab town of Nablus which is over the ‘Green Line’ (the pre-1967 border of Israel). The settlement has a reputation for politically extreme residents, several of whom have been killed or injured during the recent years of the *intifada*. Furthermore, if the *Yehudah VeShomron* areas were ever transferred to the Palestinian Authority, then the settlement would be dismantled. The interviewee was convinced that her roots had played a major role in the development of her political and nationalistic opinions and there is a possibility that even though the participant identifies herself as a devoutly Orthodox Jew, her political views have been shaped as much by what she believes as by where she lives:

“I think that my answer is affected by the fact that I live in Tapuach. Clearly for me giving up land is unquestionable.”

(interview 16)

If this notion - that our opinions and viewpoints are affected by our religious beliefs only on an unconscious level - is replicated to the area of suicide, then it could be central to our understanding of suicide ideation amongst religious people, and crucial in the development of any programme aimed at prevention.

A conflict of interests

Five participants raised the more complex issue of a contradiction - and indeed a clash - between their religious beliefs and their political outlook:

“Even if the Rabbis were to say outright that we aren’t permitted to dismantle them (settlements in *Yehudah VeShomron*), I still think that it wouldn’t change my opinion. But I would try and keep the respect of the *Halacha* by not shouting about it from the roof tops. And I would always say that it is my opinion and not that of the *Halacha* – I mean I wouldn’t say that the Rabbis got the *Halacha* wrong but just that it is hard for me.” (interview 6)

“At the end of the day, I at least don’t shape my opinions according to what the *Halacha* has to say but according to all sorts of ideas that you develop and the media and stuff.” (interview 8)

It is important to clarify that the reference here is not to participants who deny the *Torah’s* relevance to political issues, but rather to those participants who define themselves as religious, acknowledge that the *Torah* or the Rabbis have something to say about a particular issue but find themselves holding a contradictory viewpoint. One participant attempted to solve the apparent contradiction by adopting the tradition of an ancient Jewish sect known as the Karaites which came into being at the beginning of the eighth century. The Karaites drew a distinction between the Written Law, i.e. the Bible which is the sole source of Karaite creed and law, and the Oral Law, the *Talmudic-Rabbinical* tradition developed by the Rabbis, and as such, according to the Karaites carries much less weight (Heller & Nemoy, 1972):

“In our community there is a kind of feeling that regarding religion you have to make one decision in your life and that is whether or not to be religious. I think that there is another important decision which most people ignore and that is how they want to relate to the Oral as opposed to the Written Law. So with regard to my every day life I think it is affected perhaps less than other religious people. I don’t pray three times a day; I don’t lay *tephillin* every day.” (interview 13)

Although this particular interviewee had not wholly formulated his ideas and even within his own lifestyle he was aware of certain key contradictions, it is significant in that he was attempting to reconcile the aforementioned inconsistencies. The other participants adopted a less sophisticated if more theologically challenging standpoint which acknowledged the contradiction but denied it any major significance:

“Interviewee I know that religion plays a part in all these issues but for me I don’t think that it affects what I think.

M.B. So in theory there could be a contradiction between what the *Halacha* says about a certain issue and what you yourself think about that issue?

Interviewee Definitely

M.B. And you feel comfortable with this?

Interviewee Yes. Things that I do or think, in general I feel happy or comfortable with.”
(interview 5)

This position seems to be in tandem with a developing conceptual standpoint which was identified in chapter three as ‘the fourth option’. Traditionally when facing a conflict between religious principles and a certain prohibited mode of behaviour, the religious Jew had forfeited the behaviour, revised his self-identity and seen himself as irreligious, or succeeded in obtaining Rabbinic authorization for his actions. The fourth option is to continue - even publicly- the illicit activity whilst retaining a religious, Orthodox identity (for a fuller discussion of this issue together with relevant examples, see chapter three). Shechter, (2000) offers an explanation of the apparent dissonance based on Lifton’s (1993) understanding of the psychological construct of identity. Lifton sees the rapidly changing modern society as engendering an identity construct which allows for a much greater degree of flexibility. This modern identity style favours, according to Lifton, partial or fragmented moral, ethical or ideological standards as opposed to the traditional inclusive and resilient

value systems. As will be shown, ‘the fourth option’ may well be relevant when trying to understand the participants’ standpoint on suicide.

There are, in addition, those participants who **acknowledged** the contradiction in their replies and yet expressed a degree of **discomfort** at its recognition. They were often self critical, acknowledging that ideally, religious beliefs should affect political or nationalistic standpoints but that due to apathy or indolence we don’t, on the whole, reach that level of religious awareness:

“It definitely should have an effect. I think that there is a problem that we aren’t exposed enough to how the Rabbis or religious leaders view all sorts of questions relating to current affairs. Maybe the problem is that I don’t make it my business to find out what they have to say. At the end of the day, I at least don’t shape my opinions according to what the *Halacha* has to say but according to all sorts of ideas that you develop and the media and stuff.” (interview 8)

One such interviewee framed the contradiction in terms of a challenge which becomes a springboard for learning more about the problem, ultimately stimulating spiritual growth:

“I think that such a contradiction first and foremost creates a desire or a thirst to go away and learn the issue in depth to see where the contradiction lies. My aspiration is that my opinion will always be in line with the *Halacha* and if you work on it hard enough then that is usually what happens, and definitely you might change your mind. You will learn the issue in-depth and suddenly you will see that the *Halachic* logic or way of thinking makes sense to you and things will be clearer. You have to understand that for me at the end of the day the *Halacha* represents the way of *Hashem* and so it is the right way. But sometimes it’s hard.” (interview 10)

“I’m not really sure”

A small group of participants (20%) showed a distinct vagueness in their response. In general they gave the impression that they were unsure of their answers. It was apparent that they had not previously given the question much thought and now, faced with the issues, found themselves somewhat faltering and lacking a definitive or considered response:

“M.B. Do you think that if you were to choose a political party to vote for that your choice would be affected by you being religious?

Interviewee Yes, but it’s hard to say that it’s because I’m religious. I’m not really sure - it’s really hard because it’s me and part of my being me is that I’m religious but there are other aspects to me which aren’t necessarily associated with being religious. For example I love music and you can love music if you are religious and if you aren’t. In the same way, choosing a party is about everything that you are.”

(Interview 15)

“I don’t feel that my views are affected by my religious beliefs but it is hard to differentiate between the two because that is who I am.”

(interview 6)

Intuitively, this is a significant group within the Religious Zionist community and when considering the issues of suicide ideation and acceptance, especially regarding prevention-centred programmes, it is a group which must be taken into consideration. Uncertainty or vagueness were seen on different levels. There were those participants who were comfortable in expressing a direct relationship between political or nationalistic issues and their religious beliefs but who found it hard to accept that they would choose which party to vote for according to such considerations, and there were those who were uncertain about **any** relationship between politics and religion. Once again it is important to clarify that this sub-group are not those participants who clearly oppose any suggestion of such a relationship but rather those who are simply not sure and who seem somewhat confused.

Religion and Politics - Concluding Thoughts

The interviews offer an indication of how, within a relatively homogenous group of participants who all define themselves as religious, there are divergent opinions about how their religious beliefs impact on areas of their life which are not of a solely religious nature.

Since the Religious Zionist ethos contains amongst other factors clear ideological and political features, from the outset it was felt important to verify the issue of political and nationalistic opinions. Retrospectively, this area has also proved useful as a means of discerning how people's religious beliefs influence areas which are not obviously of a religious nature. These insights were particularly valuable when trying to understand the way members of this community view other issues which are not necessarily directly related to religious beliefs. Suicide is one such issue.

The Relationship between Religiosity and Coping with Harsh Life Situations

The interviews focused heavily on the area of harsh life situations. The participants were questioned as to their coping techniques and asked to recall situations where they had been compelled to cope in some way or another. When they could remember no such situations they were asked to imagine themselves in such circumstances. A distinction was drawn between 'harsh life situations' and 'life and death situations' and many of the participants responded quite differently to the two different options:

“Interviewee In hard situations I kind of cut myself off from everything – I don’t think about *Hashem* or my religion, it’s just not part of the process. I suppose that after a time you can say to yourself that maybe it was supposed to be this way and then it really helps but in the first instance it’s about survival and then nothing helps apart from just hanging on.

MB And what about in life and death situations?

Interviewee Here it is different. Here only your belief in *Hashem* can help you. I had a close friend who was killed in a car crash and it was really hard for me. At the end of the day I convinced myself that although I couldn’t understand it, this is what was meant to be and somehow I carried on.” (interview 10)

When considering the issue of suicide ideation it would seem that a participant’s coping strategy regarding harsh life situations is even more relevant than situations of life and death. A large proportion of adolescent suicides is related to specific life crises (Carson et al., 1988) and when researching a religious community, it is important to understand if and how, at these critical moments, religious beliefs are effective and if they are indeed at all relevant to these experiences.

In general the participants were cooperative and helpful. They willingly shared their experiences, often raising difficult and troubling memories:

“The first time I met death was when the father of a close friend from school passed away. Anyway this man was apparently a very special person and I remember hearing the verse “The Lord gives and the Lord takes away” and saying to myself it’s awful but we have to be thankful for the time that he was alive. And today if it were to happen to me, G-d forbid, I hope very very much that that would be my response.” (interview 14)

There was an air of seriousness and sincerity in the interviews as well as a general feeling that the participants were answering the questions with a high degree of self-disclosure and candour. The interviewer’s background as a clinical psychologist was helpful, both in allowing the participants to deal with difficult emotional experiences

and also in organizing their memories. No less significant was the interviewer's awareness of the importance of the processes of *working through* and *closure*. Although it was clear from the outset that the interviews were research-based and had no clinical objectives, the areas under discussion and the questions which were posed were obviously likely to touch on material of a clinical nature. The interviewer was aware of this concern and on one occasion even felt it important to ask the participant if he had ever discussed in psychotherapy a specific topic which he had recalled. Only when the interviewee replied that he was at present in therapy and that these issues had been dealt with in several of the sessions did the interviewer feel free to continue with the interview with the research objective at the forefront.

As was noted in chapter one, religion has traditionally been regarded as a buffer against suicide (Durkheim, 1897). The semi-structured interviews in this study are part of an attempt to examine and understand this notion in a more methodical and meticulous manner. As will be seen the issues are complex and the blanket buffer theory is clearly an over-simplification (see Pescosolido & Georgianna, 1989 or Breault, 1986). The religious buffer against suicide activity, when it exists, is an intricate interaction between personality and religiosity variables which lead, and sometimes fail to lead to a defence against suicide ideation or suicide itself. To understand these processes, it was deemed necessary to utilize research methodology which incorporates discerning techniques which are receptive to the sensitive issues at hand.

In general terms the sample divided itself into those participants who felt that their religious faith was relevant to their coping with harsh life situations (65%), those who appeared confused and perplexed by the issue (15%), and one or two

participants who seemed unable to see the relevance of their faith when faced with harsh life situations.

Faith helps!!

Of those participants who **could** relate their ability to cope with their religious belief, the majority saw their faith as a tool of perspective. In this way, death, for example, could be framed within some sort of Divine plan:

“I guess that it would help me somewhat. I think that at the end of the day the knowledge that there is a Master of the universe and that everything has a Divine reason and that at the end of the day, everything is for the good, I think that these basic beliefs would help me to keep a sense of proportion even if things were quite bad.”
(Interview 8)

Alternatively, faith was seen as a source of comfort. When harsh life situations generate a feeling of being lost in a sea of insecurity and doubt, belief in G-d becomes an island of stability:

“It’s about a sense of belonging. I kind of came home to my *Mishna* three times a day. When I was praying I felt at ease and comfortable and comforted. It was like a kind of refuge from everything that was going on around me.”
(interview 6)

There were those whose trust in G-d was strong enough for them to believe that there was some rhyme or reason to events which had taken place. And yet this belief generally went hand in hand with an acknowledgement of an inability to understand such cosmic reasoning. This expression of faith in which negative life events are framed as being part of a Divine plan is referred to by Argyle (2000) as ‘benevolent reframing’:

“For a G-d-fearing person the whole issue of death has a different meaning. For me I will try and look at the significance of the event – however hard it is. I believe that there has to be a reason even if at the time it’s not always clear to me. Nothing happens by chance. There isn’t such a thing as chance or luck, everything is part of a wider plan.” (interview 1)

“What happens, however terrible, is part of a bigger plan that we might not always understand but that we can believe in and yes, I suppose that that would help you.” (interview 3)

Interestingly there were a small number of participants who acknowledged that their faith increased when things were not going well:

“When I look to the past there were times like when I first started the army when things were really hard for me and it was then that I prayed more diligently and generally held on to my faith in G-d in a much stronger way than in usual times.” (interview 6)

Even though this view was not explicitly expressed in most of the interviews, on reflection, it might well be a common trend. Indeed, perhaps it is more natural to turn to one’s Maker at times of need. It should however be stressed that notwithstanding any reflective preconceptions, this trend which Koenig et al. (2001) refer to as the “foxhole effect” was not expressed in the vast majority of the interviews.

Two interviewees explained that when they had been in a situation of total despair they had compelled themselves to believe, actively raising their faith in G-d to an accessible level of consciousness:

“When Y. (close friend) was killed I was in a real state but I clearly remember trying to make sense of the situation by forcing myself to remember that he was in heaven and that he was in a better place and he was close to G-d and all sorts of thoughts like that.” (interview 6)

“MB And what about in life and death situations?

Interviewee Here it is different. Here only your belief in *Hashem* can help you. I had a close friend who was killed in a car crash and it was really hard for me. At the end of the day I convinced myself that although I couldn’t understand it, this is what was meant to be and somehow I carried on.” (interview 10)

If this combination of cognition and faith is indeed an option and these participants are not exceptional, then the ideas which could develop from such an understanding may well be relevant to the issue of suicide prevention. One of the key themes which became clear through the interviews is the difficulty in accessing sources of belief and faith at critical moments. If it is possible to access these sources through some sort of conscious cognitive processing then the strength and comfort which faith can provide for religious individuals might become more readily available. This idea will be further discussed in later chapters.

Another area which certain participants raised was the **type** of faith, or the **way** in which their faith was expressed. One important division was between active and passive or unconscious faith. One interviewee succeeded in precisely expressing his feeling that his faith was an active element of his coping strategy but in an instinctive or automatic manner:

“.... in complex or painful situations, I can’t say that I stopped everything and prayed to *Hashem*, but I can say, for example when the army sent me to the tank corps and not to the paratroop regiment which is what I really wanted, I think that I kind of unconsciously said to myself that this is what was meant to be and the important thing is to serve my country in the best way possible.” (interview 14)

Conversely, there were at least seven participants who identified their faith as being both deliberate and active. They were aware of a conscious process of coping which usually involved prayer as a dominant feature:

“Every hard situation which I find myself in, the first thing that I want to do is to pray. It’s hard to compare myself to other people but I think that I’ve been in hard situations and the only way that I have managed to cope is by turning to *Hashem* and praying to Him. And if in the past I have fallen, the way that I have picked myself up is also through prayer.” (interview 12)

The prominence of prayer as an expression of inner faith has also been noted in the research literature (for example see Manfredi & Pickett, 1987 or Ellison & Taylor, 1996). Indeed there is an indication that, at times of stress, prayer is the most frequently used coping behavior.

Faith helps – sometimes!!

Several participants noted that in **regular** harsh life situations such as disappointment over not gaining a certain position or a situation of romantic rejection, their religious beliefs played no part. However in situations of life and death, their faith becomes critically relevant and is central to their coping strategy:

M.B. Do you think that your faith or being religious helps you to cope in difficult or harsh situations?

Interviewee No unfortunately not. Which means, I suppose, that G-d isn’t so much part of my life? Perhaps I would like it to be different but that is the situation at the moment.

M.B. And what about in more extreme situations? Say in situations of life and death do you think that your faith helps you cope? Maybe someone who was close to you was killed or died or maybe you can imagine how you would react in such a situation?

Interviewee Here I do think that your faith helps you to deal with the situation. I have a basic belief that someone or something has a plan and is governing things from above. I’m sure that that conviction would help me to cope – it would give some sense or perspective. After someone dies they don’t just disappear but they are somewhere else. And I believe that that place is a good place.” (interview 9)

“After the initial shock...”

Within the group of participants who acknowledged the relevance of faith in their coping strategies, a common theme was the point at which religious belief becomes relevant. In particular, six of the interviewees specifically referred to a second stage of processing, whereby the initial crisis is met by an instinctive, basic, non-religious form of survival and at some later stage – which might be after minutes, hours, days or even weeks - their religious beliefs become accessible, enabling a more sublimated and less crude form of coping:

“MB You mentioned that your fiancé is in the army. Let’s say that you hadn’t seen him for three weeks and you were really really missing him and at long last he was coming home for *Shabbat* and you are really excited and then on Friday afternoon you get a phone call saying that he can’t get out for *Shabbat*. In such a situation do you think that because you are religious you would cope with the situation differently from someone who wasn’t religious?

Interviewee No absolutely not (laughing). Nothing would help me then. I don’t know. Maybe after a while I might think that it’s a test for us and *Hashem* knows why He’s doing this - but definitely not at first.” (interview 11)

“Basically I imagine that the harsher the situation, the more you would need to rely on your faith to keep you going, but it might be that immediately on hearing, for example, that someone close to you has died, that at first you would be totally depressed or angry or something, but after the initial shock the faith part in you would bring in some sense of proportion.” (interview 8)

It should be stressed that contrary to any intuitive explanations, the participants who were suggesting this two-phase process were also amongst the most pious and devout of all the participants. They reported their religion as being central to their lives and their faith as all-encompassing. Pargament & Brant (1998) defined this as the difference between a religious orienting system which is “one step removed” from coping methods employed in a specific stressful situation:

“Knowing that religious faith is a central part of an individual’s orienting system tells us something about that person, but it does not tell us how that person’s faith expresses itself in specific situations” (Pargament & Brant, 1998 p.116).

Pargament et al. (1990) strengthened this view with research which compared the predictive power of religious coping measures with the predictive power of religious orientation. The *religious coping measures* proved to be better predictors of the *religious outcome of a harsh life event*, the *coping efficacy surrounding the event* and the *mental health* of the participant. Ebaugh et al. (1984) carried out a study in which they investigated how participants from different religious groups responded to crises. This research is particularly relevant to the present study in that all of Ebaugh’s participants were religious. The study compared the responses of Christian Scientists, Catholic Charismatics and Bahais and the results suggested that only the Bahais turned to their sacred texts and religious beliefs as part of their **immediate** coping strategy. The other two groups appeared to be less inclined or able to access their religious coping resources, at least during the period surrounding the crisis itself. In this way the results were similar to those noted with the majority of the participants in the present study.

Sattler et al. (1994) seem to contest this outcome. They interviewed survivors of Hurricane Iniki in Hawaii and found that *religious coping* was positively related to *emotional distress during the period surrounding the acute stressor*. It is, of course, possible that the mass, public nature of the trauma generated different responses from those noted in the more personal or private type of situations highlighted in the interviews in the present study.

In general, recent theoretical models (for example Koenig et al., 2001) tend to see the coping process in terms of a cognitive appraisal (the way in which the situation is assessed in terms of personal values, prior experiences and future goals) followed by

actual coping activities. In terms of Koenig's model, in the present research, religious beliefs for the majority of the participants were not represented in the appraisal stage of the coping process and at best appeared later in the various coping activities.

“...I can't say that I'm absolutely sure.”

As in other areas raised in the interviews, there were those participants who appeared confused by the questions and uncertain in their responses. It seems that someone can genuinely identify himself as religious, can be particular in keeping the *Mitzvot* and yet can fail to address in a religious context, even basic questions of belief such as the way in which one deals with harsh life situations or the way in which one copes with the death of a loved one:

“MB I want to develop this idea and to ask you if in situations of life and death you think that your faith would help you cope. Maybe already you've been in a situation whereby someone close to you has died or been killed or

Interviewee It would be nice if I could just say yes. But I'm not sure. When I was in the army one of the soldiers under my command was killed. That is the closest to the situations that you are talking about. I remember thinking - but no, that's more about a memorial to his name - I remember making up my mind to take some of the positive aspects of his character – for example he was known in our unit for the impressive way that he treated and respected his parents and I thought to myself if I can improve myself in that area then it is as if a part of him will live on. But that isn't exactly what you are talking about. I don't remember my faith actually helping me cope with that awful situation. I'm not sure that I understand exactly what you mean.”
(interview 14)

“Interviewee I was once at a funeral of a friend who lost his son in a terror attack and when this man spoke you could hear that he was speaking from the depths of his pain but also from the depths of his faith. It was unbelievable to hear it.

MB And you have the feeling that if G-d forbid you were to be in a similar situation that you too would find a similar strength?

Interviewee I think so, but I can't say that I'm absolutely sure.” (interview 12)

Two of the participants remarked on how harsh life situations actually reduced their ability to believe or made their faith less accessible:

“At that specific moment it might be hard to relate to something in those terms and to be honest it isn’t that easy at the best of times. It’s not as if you put a *kippa* on your head and suddenly everything makes sense and you can see everything as part of G-d’s plan.” (interview 1)

Crises of Faith

Although the answers reflecting confusion, or harsh situations leading to a reduction in faith were a minority view, a related and much more common theme was the relationship between crises of faith and the ability to cope:

“Just that if your belief isn’t strong for whatever reason then you are more liable to break.” (interview 4)

Several participants (15%) spoke about the significance of the relationship between the strength of one’s belief and the ability to cope. Indeed one interviewee related how a crisis of faith compounded a bad situation in which he found himself:

“Faith isn’t something static. There have been bad periods when my faith stood by me but I think that there have also been situations when my faith even complicated matters or, dare I say, made things worse.” (interview 7)

The issue of crises of faith which was touched upon in chapter two intuitively seems to be critical to any discussion of coping patterns of religious people. Some of the interview responses referred to this issue, and in hindsight it is an area which possibly should have been covered in a more substantial manner. As has been previously noted, one of the aims of the semi-structured interviews was to direct and develop the quantitative section of the research and here it became clear that the

relationship between crisis of faith and coping strategies was, in a religious milieu, an area which would need to be closely examined through the questionnaires.

The relationship between religiosity and suicide ideation and acceptance.

The final section of the semi-structured interviews specifically examined the subject of suicide. The participants were asked about their general reflections on hearing the news that someone had killed themselves. In addition they were questioned as to their own personal experiences of suicide ideations. The interviewer asked about their motives and attempted to understand what, if anything had helped them to cope, and what had given them solace.

General Outlook on Suicide

The majority of participants (55%) saw suicide in a very negative light. Terms such as disdain, pathetic, pathological were widely used and there was a majority consensus of non-acceptance:

“When I heard what he’d done my reaction was contempt. I just thought it was pathetic.” (interview 1)

“There is something innately wrong with suicide as an option.” (interview 4)

“Basically I see it as stupidity. I know that that doesn’t sound very complex or mature but that is my gut reaction. I wasn’t angry but it was just a stupid waste!!” (interview 8)

Although when faced with the news that an acquaintance had committed suicide, most of the participants reported an essentially negative response, the interviews, in fact revealed a wide range of reactions, from outright non-acceptance -

“I knew someone, a boy who I was in school with, and recently I heard that he had committed suicide and even though we heard all sorts of stories that he had been abused and all sorts of rubbish like that, I still couldn’t accept it – it shouldn’t have happened full stop.” (interview 10)

through understanding but not accepting:

“Maybe in a situation when absolutely everything was going wrong - home, health, work, everything - then maybe I might be able to understand the person but I definitely wouldn’t agree with it or accept it.” (interview 8)

- to endorsement in certain specific and usually extreme situations:

“Someone who was captured and held in a terrible prison and they non-stop tortured him and he had no hope of escape. In that situation I think that suicide might be a reasonable option.” (interview 5)

Religious content of the negative outlook to suicide

Although the interviewees exhibited an array of oppositional stances, only a small minority related their antagonism to religious issues. When asked to expand and explain their animosity to the concept of suicide, the vast majority of responses either ignored any religious aspect in their objections, or actively negated the relevance of religious beliefs in the formulation of their opinions:

“MB If the same person had committed suicide or been killed a car crash would your response be different?

Interviewee A bit, but only a bit. Suicide is never a natural death and therefore you would always think about it slightly differently. Not even religiously, just mentally you view it differently.” (interview 2)

“M.B. Do you think that these views are affected in any way by you being religious because to be honest what you are saying is very close to the line of the *Halacha*?

Interviewee No I don’t think so. I think I would feel like that if I was irreligious too.” (interview 5)

In all of the interviews the participants were asked how they would respond on hearing that a friend had killed himself. Only two participants mentioned G-d or their religious beliefs as being related to their response and even for these the allusion to a religious attribution of their responses was either incidental or negligible:

“He’s got a family and he has to think about them too. And if you are someone who believes in G-d then you have the added aspect that suicide is not allowed.”

(interview 1)

“There is definitely a difference, and it’s partly based on the *Halacha* but to be honest it isn’t only that. It’s also that it’s just something that you shouldn’t do. It’s like it’s, I don’t know, weak I suppose.”

(interview 3)

These scarce and tortuous comments ironically highlight what seems to be a gaping hole in the outlook of this religious community towards suicide. All those participants who were questioned on whether they knew the *Halachic* position on suicide, showed a clear knowledge and a succinct understanding of the *Torah’s* outlook:

“MB Do you know what the *Halacha* says about suicide?

Interviewee Yes, I know that you aren’t allowed to bury them within the walls of the cemetery. Suicide is forbidden because basically your body isn’t yours to do with as you please but it belongs to *Hashem*.”

(interview 16)

“I know it’s prohibited. I wouldn’t be able to quote you the relevant paragraph in the *Shulchan Aruch* (code of law) but it is definitely prohibited.”

(interview 8)

The issue is **not** one of ignorance but the tendency to exclude religious values from areas which are not seen to be outrightly religious:

“At the time (when a cousin committed suicide) and for years afterwards I dealt with it by totally denying that he had killed himself – I couldn’t even say the words. But more recently when I did accept it, I felt that more than anything else he had been stupid – it was just a stupid waste. I wasn’t angry. To be honest my only real response was that it was just a stupid waste!!”

(interview 7)

When questioned about this issue, one of the interviewees suggested that the general atmosphere within the Religious Zionist community does not engender a feeling of G-d's presence in our everyday lives. The implication is that the default frame of reference is not necessarily a religious one, especially with regard to issues which are not specifically regarded as being religious topics:

“MB If you were to hear of someone who had committed suicide, do you imagine that your religious faith would affect how you respond to the news?

Interviewee Not really because unfortunately we don't live our lives at that level. We learn *Torah* and we pray but the environment in which we live isn't really enough of a religious atmosphere.” (interview 2)

In interview 11 a similar opinion was expressed:

“M.B. Do you think religious feelings affect how people view suicide?

Interviewee I think it depends on how people see religion – if religion is an all-encompassing obligating framework then suicide will also become something which is seen within a *Halachic* framework – but most people aren't like that.”

The apparent conclusion here is that for many of the informants, when regarding suicidal behaviour, **faith and religious beliefs were not of paramount importance.**

The participants' recollections of their own suicide ideations

Those participants who had reported previous suicidal ideation were quizzed as to the origins of these thoughts. Several motives were suggested including revenge and loneliness:

“I remember very clearly feeling that if I were to kill myself then my officers would feel bad – it was a type of revenge.” (interview 10)

“I think it's about being lonely. Feeling that you are totally alone in the world and that there is absolutely no one in the world that you can turn to.” (interview 12)

It is poignant to note that when discussing the background or motives to the suicidal situations, the majority of participants (80%), including those who positioned their religious faith at the centre of their lives, failed to relate the subject of suicide to religious issues, belief or faith. Once again, participants appeared able to ignore the apparent dissonance between religious self-definition and an outlook which clearly discounts the *Halachic* viewpoint on a specific issue:

“I worked with someone once whose brother was dying from multiple-sclerosis. He was a deeply religious man and yet he asked his brother why he didn’t kill himself. He used to say to me that maybe he was only partially religious but I didn’t see him like that. I really understood him and didn’t see him in any way as some type of heretic.”
(interview 9)

“On the one hand it’s forbidden and therefore it’s wrong and that’s the end of the answer but on the other hand you are talking about situations which to be honest, are really hard for me to imagine and I’m not sure that I’d want to judge them at all. I know in theory that it’s wrong but I don’t think that I’d like to have to pass judgement.”
(interview 3)

Lifton’s (1993) reassessment of traditional models of identity which was discussed in chapter three may once again aid our understanding of the phenomena. A further and possibly related option is to link this theme with issues raised in chapter two regarding the make-up of the Religious Zionist community in Israel. As was mentioned, this community is by and large associated with the Modern Orthodoxy sector of Judaism whereby a middle path is sought which combines an obligation to the *Halacha* with an acceptance - albeit sometimes tacit acceptance - of the modern world. This delicate balancing act (Fishman, 1995) appears to demand a degree of compartmentalization by which areas are defined as being of **either** religious **or** secular significance. Clearly there are areas which are common to both categories but as has been shown, certain issues such as leisure activities can become designated as

being beyond the realm of religious influence or jurisdiction. In essence these areas do not conflict with a religious life style but on the other hand they are clearly not central to a religious existence. An example might be a love for classical music. One would struggle to find a *Halachic* objection to listening to Beethoven or Mozart yet the majority of Rabbis would not see the act of listening to classical music as pertaining to a particular *Mitzvah*. As has been noted, in this study, several of the interviewees seem to suggest that suicide and in particular suicide thoughts are a similar case and that any discussion of the topic does not therefore demand a religious frame of reference:

“M.B. Do you think that these views are affected in any way by you being religious or by your faith because it’s basically very close to what the Halacha has to say?

Interviewee No I don’t think so. I think I would feel like that if I was irreligious too.” (interview 5)

Crises of Faith – An Exception to the Rule

A notable exception to the above conclusion is the issue of crises of faith. Here, 25% of the participants saw a clear relationship between the risk of suicide and religious doubts. In chapter one this linkage was raised as a theoretical possibility and here several of the interviewees when questioned on the circumstances surrounding their own suicide ideation spontaneously raised this area as a key issue:

“There’s no doubt that if someone is having doubts about their belief in G-d and they are really depressed, then suicide becomes more of an option.” (interview 1)

“I think that if someone has got to the stage when they would consider killing themselves then it means that their religious faith has slipped – the two don’t go together. You can’t lead a fully religious life with faith in *Hashem* and then try and kill yourself – it’s a contradiction. So if someone wants to commit suicide it means that they must be having doubts or some sort of breakdown in their faith otherwise they would never get to that stage.” (interview 3)

“To be honest I think that if someone religious commits suicide then he must be in some sort of religious breakdown - what they call a crisis of faith, otherwise it just doesn’t make sense.” (interview 16)

Suicide Situations – Coping Strategies

Finally the participants were asked if and how their religious beliefs had helped them to survive dire life situations in which suicide had become an option. Those participants who felt that they could relate to the issue divided into two distinct groups. There were those who had experienced suicide-threatening situations and clearly stated that their religious beliefs had played absolutely no role in their coping strategy:

“M.B. The suicide situation which you have described - do you recall any kind of thought input which came from a religious viewpoint? Did your being religious or believing in G-d affect your thoughts or feelings at that time?

Interviewee No it wasn’t relevant and my reasons for not doing it were because I didn’t want to hurt anybody, not because of any religious guilt or anything.

M.B. In general do you think religious feelings affect how people view suicide?

Interviewee I think it depends how people see religion – if religion is an all-encompassing obligating framework then suicide will also become something which is seen within a *Halachic* framework – but most people aren’t like that.”

(interview 9)

“MB During that time when you were feeling rock bottom, did religion play any part? Did issues of faith cross your mind?

Interviewee No, not at all. As I said before when you get that low then religion is the last thing that you think about.” (interview 10)

Conversely there were those who saw their faith as being critical to their survival. Within those who acknowledged that religion had a part to play there were three distinct groups:

1) Those who felt that knowing that suicide is such a serious transgression was relevant to their coping - 15% - (see also Koenig et al, 2001):

“Interviewee The fact that suicide is so clearly forbidden would help me. I’m not sure that my faith would help me get out of the depression but I think it would keep my head above water and it wouldn’t let me get to the point of suicide...

M.B. When you thought about harming yourself did the fact that *halachically* it is forbidden come into your mind?

Interviewee Definitely... I was aware of the prohibition and I remember feeling especially then, when I felt so close to *Hashem* that I couldn’t let Him down in that way. I know it sounds childish but that’s what I felt.” (interview 6)

2) Those whose faith in G-d was helpful although without a specific reference to the *Halachot* concerning suicide - 45% - (see Stack, 1983):

“MB With the boys I always use an example of being chucked out of officers’ school but with girls it’s hard to think of an example but let’s say that, G-d forbid, there is a girl who has been married a few years and she can’t have any children. Would you expect her not to be sad?

Interviewee No she would clearly be sad but not depressed because , in theory, she would look for G-d’s hand or His message in what is happening and maybe she would know that for some reason that she may never understand, she isn’t supposed to be having children now. I don’t know, maybe she should be adopting kids or something like that. Just that it isn’t happening by chance, or say just bad luck. There is some direction even if it’s not clear or even if it creates sadness. I don’t think it’s depression and definitely those kinds of understandings would lead someone away from the path of hurting yourself or suicide.” (interview 3)

3) Those who emphasized their relationship with G-d as if they were clinging to a raft in stormy waters - 22% - (see Stack, 1983):

“At the end of the day I think that my belief in G-d helped me cope but not because the *Halacha* says that you aren’t allowed to commit suicide. It was in a more positive way. It was more like this isn’t what *Hashem* wants me to do with my life!! Again you have to understand that at times like that what helps is religious awareness or awareness and belief in G-d and much less the letter of the law.” (interview 7)

This feeling of G-d as a comforter in hard times, reminiscent perhaps of Psalm XXIII (“Even though I walk in the valley of the shadow of death, I will fear no evil for You are with me ...”) was a theme which recurred in several of the interviews:

“Interviewee In such an extreme situation I actually think that it would help me to cope. There is a basic belief that there is someone up there who can help me. In the (physically taxing infantry) training session I don’t think that the belief would help me but in extreme situations like death, then yes.

M.B. And what you are saying is that the fact that you believe that He could help you, actually helps you to cope.

Interviewee Yes exactly.” (interview 5)

Suicide – Closing Thoughts

The issue of suicide, perhaps more than any other topic engendered a very wide range of responses amongst the interviewees. Although all of the participants paid a minimum negative lip service to the shocking events surrounding someone taking his/her own life, as the interviews progressed, the blanket non-acceptance slowly developed into a wide range of responses which often expressed a degree of understanding or at least acceptance.

When the participants discussed the conditions which led them personally to suicidal crises, religious beliefs seemed to play a minor role. However, when it came to coping strategies, a far higher percentage reported relying on their faith to ‘get them through’. This wide array of responses is indicative of the turmoil and confusion surrounding suicide ideation and the way in which such severe crises are dealt with. One of the vaguer areas is the codification of the different responses into some sort of order. In the qualitative section of the study it was hard to gain a standard measure of religiosity and although the interviewees were questioned intensely regarding their religious beliefs and practices it is unrealistic and clearly unscientific to look for, on

the basis of this information, correlatory patterns relating religiosity and coping strategies. This subsequent phase of analysis which must attempt to link specific features of religiosity with different modes of coping with life crises will be left to the quantitative section of the study. If nothing else, the interviews clearly indicate the profound need of this next stage.

Conclusion

The interviews served to highlight the broad spectrum of outlooks and ideas which are to be found within the Religious Zionist community in Israel. Although the diversity of the community was already referred to in chapter two, the extent of the multiplicity of ideas, specifically regarding attitudes to coping and coping strategies in the 18-24 age bracket was powerfully confirmed in the qualitative research. Specifically the qualitative section highlighted a high variability in the way in which the participants use their faith whilst coping with harsh life situations. Even in this small, relatively homogenous group of religious young men and women, there are significantly varying degrees of religious coping. One of the key themes was the perhaps surprising lack of availability of religious coping resources in harsh life situations – even for those participants who define themselves as being deeply religious. In particular there appeared to be a trend in the responses whereby as a first reaction interviewees were using what might be seen as secular coping mechanism such as denial and only in the later stages of coping were they able to access religious coping techniques.

Several of the interviews highlighted a lack of structured, considered opinions regarding religious belief and faith. Indeed the research suggested that seeing oneself as religious in no way offers an automatic guarantee that one will possess mature

developed ideas as to how one copes in harsh situations or how one's beliefs are effective in one's life.

A further critical area, relates to the construct of "identity" whereby the traditional Eriksonian paradigm which emphasises inclusivity, longevity and resilience seems for a certain section of the Religious Zionist community to be less relevant today. Lifton (1993) has suggested a more fluid and dynamic perception of the construct. This allows for a greater understanding of trends which are evident in the community and which seem to explain certain aspects of coping strategies which were noted in several of the interviews.

Finally the interviews stressed the need for a standardized delineation of the religiosity variable. Since the religiosity of the participants is critical to the study as a whole, it is clearly important to determine which factors are active within this general term and to verify which (if any) of the definable components of the religiosity mechanism are relevant to the coping strategies of each participant. It is clear that the function which is generally termed as religiosity is in fact a selection of a number of inter-related factors which cohere to define a person's religious outlook. The quantitative section of the research must therefore attempt to delineate these factors and relate them, first to traits related to religious coping and then to the issue of suicide ideation and acceptance. In other words the quantitative section of the research must attempt to determine which aspects of a general religiosity variable will enable an individual to access 'religious coping strategies' at the time of a harsh life situation. The interviews not only highlighted the range of religious coping but emphasised the ambiguity in the relationship between religiosity and coping and suicide. These conclusions direct the quantitative questionnaires to a very specific path: to analyse the different aspects of religiosity and to seek out the relationship with different methods of coping – religious or otherwise. Pargament & Brant (1998)

asked whether or not religious people experience more positive or negative outcomes of life events than those who are less religious. The present research hopes to assess, specifically for the group of people who **can** boast a religious orienteering system, not only **if** but **which specific factors**, are affecting the final coping outcome of the harsh life situation.

Chapter Five

A Quantitative Study of Religious Factors Relating to Suicide Ideation and Suicide Acceptance

Introduction

The aim of the research was to investigate *suicide ideation* and *attitudes to suicide* of young adults in the Religious Zionist community in Israel. Specifically, the study proposed to verify whether religious factors are related to suicide ideation and/or acceptance. In addition, the study attempted to examine the centrality of *religious coping* in the relationship between religiosity and suicide. Since the community concerned is religious by self-definition, the research was able to achieve an in-depth analysis of the religiosity variable - going beyond the more traditional outlook which tends to see religiosity as a uni-factorial construct. Indeed, surpassing this methodological confine was critical to the research.

The qualitative interviews provided in-depth information on how Religious Zionists view their world and specifically how in the past they have dealt with harsh life situations. In addition as has been shown in the previous chapter the interviews provided important detailed information regarding outlooks on suicide and specifically on the interaction between types of coping and religious beliefs and values. Many of the interviewees, when discussing their ability to cope with harsh life situations emphasised the importance of religious belief and motivation. This ability is in general referred to as *religious coping* and the interviews attempted to delve into its different forms and styles.

In the last twenty years the field of coping has gained popularity amongst researchers investigating the relationship between stressful events and adaptational outcomes. Folkman et al. (1986) provided an initial comprehensive survey of the central literature in the field highlighting what they referred to as a “new body of research” which looks more carefully at the precise coping processes which are utilized when dealing with harsh life situations. The authors made a clear distinction between this newer set of studies (which was later to be developed by researchers such as Koenig et al. (2001)) and the more traditional research which tended to focus on the personality traits from which coping types are inferred. The new body of research to which Folkman et al. (1986) referred is in tandem with the present research which also sees the intricate details of the coping processes (in this case, specifically religious coping) as being critical to the relationship between religiosity and suicide.

Significantly the interviews highlighted the difficulty that many of the participants found in accessing and utilizing their beliefs and religious convictions specifically when faced with harsh life events.

The interviews provided the first stage in the preparation of the quantitative questionnaires. They created a framework on which the questionnaires were built, and identified the specific areas of **motivation** and **coping** as requiring more detailed and scrupulous investigation.

In the light of the qualitative interviews, the quantitative part of the study set about trying to explore the relationship between the different aspects of *religiosity, religious coping, suicide ideation* and *suicide acceptance*.

124 young men and women from the Religious Zionist community in Israel completed the questionnaires which were selected in order to assess the following variables:

- Religious belief
- Religious behaviour: fulfilling the *Mitzvot* (commandments)
- Religious motivation
- Religious coping
- Suicide ideation
- Attitudes to suicide

Method

Research Participants

The quantitative part of the study used participants from four separate religious institutes of higher education. It was felt important to obtain as wide a range as possible whilst keeping to the basic classifications of the Religious Zionist community. The four institutions included a highly respected *Yeshivat Hesder*, which is known within the community as being educationally and religiously elitist (33 male participants). As has been previously explained in chapter three, *Hesder* is a programme which combines advanced *Talmudic* studies with a shortened military service and it is a common choice for young Religious Zionists who are motivated to study *Torah* but who also wish to serve in the army. The first *Hesder Yeshiva* was set up in the 1950's and after the Six-Day War in 1967 they flourished in popularity and many such *Yeshivot* were set up all over the country. The level of *Talmudic* studies at this particular *Yeshiva* is akin to the top *Talmudic* academies in the country and the students have a reputation of being extremely serious regarding their studies.

The second institution was a *Midrasha* in Jerusalem (28 female participants). This particular female college of religious studies could effectively be compared to the previously-mentioned *Hesder Yeshiva* especially regarding the religious and educational levels. The *Midrasha* has a country-wide reputation with very high entrance requirements relating to intellectual ability, levels of religious observance and motivation to study. The *Midrasha* boasts a stringent dress code and the girls are expected not to wear trousers or short sleeves. All types of body piercing are prohibited and all of these examples would be deemed immodest. The third institution (26 female participants), also a *Midrasha* for girls, has a very different reputation. It is situated in the country-side and is seen as being slightly more lax in its dress code and its educational demands. The students are permitted to wear trousers and short sleeved shirts and many of them wear nose-rings or other types of piercing which would be unheard of in the previously-mentioned *Midrasha*.

The fourth institution (37 male participants) is broadly similar. It is a *Yeshiva* which accepts boys who will complete the full 3 years of obligatory military service (as opposed to the *Hesder Yeshiva*). The atmosphere is slightly less intense and its reputation is of a more left-wing institution (politically and religiously). Although the intellectual standards are very high, here there may be more room for wide-ranging views and an outlook on Judaism which it would be hard to find in the previously-mentioned *Hesder Yeshiva*. Clearly the four institutions represent a very wide range of students who all nevertheless associate themselves with the Religious Zionist community.

For a detailed discussion of response rates and ethical issues see the *procedure* section of the present chapter.

124 participants were included in the quantitative study. In reference to the correlation analysis, Cohen (1992) calculates that with a power specification of 0.80, and an expected medium effect size, a sample size of 85 is sufficient to detect a significant correlation with alpha .05, and a sample of 125 sufficient when alpha is .01.

Regarding the multiple regression analysis, the number of independent variables (19) is large but based on Cohen (1992) it appears that the number of participants is sufficient to detect medium to large effects, if alpha is .05. Although it might have been preferable to work with an alpha of .01, it was considered important to include all the variables (as well as those with small numbers of items) even at the expense of a lower alpha (Loewenthal, 2001).

Of the 124 participants 70 (56.5%) were male and 54 (43.5%) were female. The age of the participants ranged from 18 to 24 with a mean age of 20.56 years (s.d. = 1.69). 98.4% of the participants were single (only two were married). The majority of the participants were born in Israel whereas around half of their parents were born outside of Israel in a wide range of countries (see table 5.1).

Table 5.1: Countries of birth of participants and their parents

	Born in Israel	Born in W. Europe	Born in E. Europe	Born in an African country (not Ethiopia)	Born in Ethiopia	Born in U.S.A., Canada, Australia or S. Africa
Participants	87.1%	2.4%	1.6%	-	1.6%	7.3%
Mothers of participants	58.9%	9.7%	4%	5.6%	1.6%	20.2%
Fathers of participants	50.8%	8.9%	8.9%	10.5%	1.6%	19.4%

Instruments

Religious Belief and Religious Behaviour Scales

As has been previously noted, religiosity is a complex variable which in research terms has long suffered oversimplification. In tandem with a few but notable recent studies the present research has attempted to provide a detailed and multifarious portrayal of the variable employing three separate questionnaires which together offer a wide-ranging picture of the individual's religious make-up. A similar multidimensional analysis was adopted by Poloma et al. (1991) who, when looking at the relationship between *mental health* and *religious behaviour*, found it necessary to designate four separate categories for the variable of prayer. In most questionnaires prayer might not be cited at all or would tend only to be seen as a one-dimensional factor!

The religious belief and religious behaviour questionnaires were based on surveys carried out by Peri Kedem in the 1980s and 1990s in Israel (Kedem, 1991). Kedem set about attempting to understand what people mean when they define themselves as religious. How does religiosity express itself and what role does religion play in the lives of religious people in modern Israel? Kedem based her work on a multifaceted conceptual outlook developed by Glock & Stark (1965). Choosing to delineate and investigate four out of the five dimensions which Glock & Stark reviewed, Kedem's research perceived religiosity as being related to ritual, ideology, experience and consequences. For the purposes of this study, the religious belief and behaviour questionnaires were based on the ideological dimension (religious belief questionnaire) and the ritualistic dimension (religious behaviour questionnaire).

The *Torah* incorporates a codex of law which comprises 613 *Mitzvot* or commandments. Many of these commandments are not relevant to today's historical

period since the absence of the Temple in Jerusalem makes many of the *Mitzvot* temporarily obsolete. Of the remaining *Mitzvot*, even within the Orthodox communities it is clearly possible to identify a range of observance whereby some *Mitzvot* are kept by the vast majority of Orthodox Jews and some are kept by a relatively small number. Similarly with questions of belief. There are those fundamental beliefs which appear to be almost universally accepted amongst the Orthodox Jews (such as the belief in G-d or the belief in monotheism) and conversely there are areas of belief which apparently are not adhered to by the whole of the Orthodox community (such as the belief in reincarnation or the belief in the power of a righteous person to heal sick people).

Although Kedem's belief questionnaire (1991) was almost totally replicated in this study, the religious behaviour questionnaire was modified for two distinct reasons. Firstly Kedem's questionnaire contained around one hundred items and it was felt to be too long especially as in the present research it was one of six questionnaires which the participants were asked to complete. Secondly although her original questionnaire was targeted at religious people, it was felt that some of the items would not provide any significant variance with the participants in this particular research and therefore the original questionnaire was scaled down to include only questions which would provide a degree of variance. This process had the obvious added advantage of reducing the length of the questionnaire.

The Religious Belief Questionnaire (see Appendix 2) consisted of eleven items ranging from belief in G-d to belief in the healing power of a righteous man's blessing. Five response categories were used whereby "absolutely believe" received a score of 1 and "do not believe" received a score of 5. An additional item probed the degree that religion plays in the participants' everyday life. For the present study, internal consistency for the belief questionnaire as estimated by Cronbach's Alpha

was .70 (which was considered satisfactory). Kedem used a three scale scoring system (believe / don't know / don't believe) and found a reproducibility coefficient of 0.92. She also concluded that the scale was one-dimensional and able to discriminate between the participants according to their "amount" of belief.

The Religious Behaviour questionnaire (see Appendix 3) was lengthier and much more complex in structure. Since the questionnaire needed to cater for a range of different religious behaviours and to allow for different religious requirements on men and women, the questionnaire was split into sections using a variety of different scoring techniques which only after the questionnaires were completed were translated into a single score representing religious behaviour (a high score representing a high level of observance and a low score indicating a low level). Positive *Mitzvot* such as washing hands before eating bread or studying *Torah* were rated on a three-level scale (keep fully / keep partially / do not keep). Negative precepts such as driving on the Sabbath or swimming with members of the opposite sex were also rated on a three-level scale (never perform this activity / occasionally perform this activity / regularly perform this activity). Nine items regarding the regularity of prayer and whether prayers were said individually or together with a quorum of ten males were answered on a four-layered ranking (pray with a *minyan* / sometimes by myself and sometimes with a *minyan* / pray by myself / don't usually pray this service either by myself or with a *minyan*). Male participants were requested to respond to a further set of 17 items regarding issues such as their observance of the prohibition of shaving at certain times of the year, how particular they are about wearing *Tzitziot* (special fringes attached to a four-cornered garment) on different occasions or the regularity with which they lay *Tephillin* (phylacteries). The female participants were asked to complete a complex table regarding the way that they dressed on certain occasions. Item 48, for example, asked if the participants

wore trousers at home / whilst going out / whilst hiking / on special occasions (weddings) / at the synagogue. The participant was asked to respond to each location according to the following scale: always / never / sometimes. For the present study, overall internal consistency for the Religious Behaviour questionnaire as estimated by Cronbach's Alpha was .85. Because of the composite nature of the behaviour scale, reliability scores were also generated for the items which were given to only male or only female participants. The following table shows these reliability scores (which were considered satisfactory):

Table 5.2: Reliability scores for the Religious Behaviour Questionnaire

Gender	Number of items	N	Alpha
Male	35	70	.95
Female	54	54	.95

In both questionnaires, when appropriate, some items were recoded so that a high score indicated strong belief and a higher level of observance.

Religious Motivation Scale

Although Allport (1959) succeeded in generating theoretical interest in the motivational factors behind religious behaviour, the field has seen a relative dearth of empirical research and a distinct lack of research instruments. Recently Beit-Hallahmi & Argyle (1997) have reiterated the importance of motivation in studies relating to religious behaviour, but the lack of recent qualitative data is apparent both in the general literature and specifically in research relating to Jewish religious observance. Lazar et al. (2002) examined the content and structure of self-reported motivation for Jewish religious behaviour, developing the religious motivation scale which was used in the present research. Lazar's questionnaire was developed in three

stages: religious motivation content identification; item formulation and reduction, and construct validation. In order to identify the various religious motivations Lazar et al. combined a detailed questionnaire concerning religious ritual together with an extensive interview. On the basis of the participants' responses to the questionnaires and the interviews, Lazar produced a list of 504 statements which related to the motivational incentives for performing various Jewish religious rituals (e.g. I go to the Synagogue because that's what my father did). In the second stage of development, using independent testers or 'raters', the researchers classified the list of 504 statements into several factors after which number of items per factor, percentage of variance explained, interpretability and replicability were together used to reach five final motivational factors or categories:

- *Belief in divine order motivation.* Motivation connected to factors such as fear of death or avoidance of punishment in the world to come.
- *Ethnic identity motivation.* Motivation related to a subjective sense of being Jewish or an action which is a symbol of Judaism.
- *Social motivation.* Such as 'in order to be like everyone else' or 'it's a way of meeting people'.
- *Family motivational factors.* Factors such as providing a warm home atmosphere or 'it helps to clarify family values'.
- *Upbringing motivation.* Motivation such as 'it's a habit from home' or 'it's a remnant of my childhood'.

Lazar suggested that the five motivational groups are representative of different areas of human concern and as such are parallel to other theoretical frameworks of human motivation such as Frankl's (1963) search for the meaning of life.

Redundant and unclear statements were dropped leaving a pool of 266 statements which was further reduced by removing items which did not significantly reduce the Cronbach's Alpha score for that specific category. Lazar used the final pool to create two separate and parallel questionnaires one of which was incorporated into the present research. The questionnaire was written in Hebrew thus avoiding any need for translation (the scale was translated into English solely for the purpose of reporting the research - see Appendix 4). In the instructions the participants were informed that previous research had developed a list of reasons or motivations for observing *Mitzvot* and activities which are associated with Jewish tradition. The participants were requested to indicate to what extent each of the motivations was important to them. The scale consisted of 58 motivation statements which were to be rated as irrelevant (1); not important (2); slightly important and slightly unimportant (3); important (4) and very important (5).

The reliability analyses according to Cronbach's Alpha indicated satisfactory levels of internal consistency the values of which are presented in the following table:

Table 5.3: Reliability statistics for the five categories of religious motivation

Motivational category	Cronbach's Alpha	N
Belief in divine order	.89	29
Ethnic identity	.86	9
Social	.83	9
Family	.83	6
Upbringing	.84	4

Religious Coping Scale

The religious coping scale which was used in this research (see Appendix 7) was extensively based on the RCOPE, a measure of religious coping developed by a team led by Kenneth Pargament and reported in a paper published in the Journal of

Clinical Psychology (2000). The original scale comprised 105 items and 17 subscales representing different styles or approaches to religious coping. In part the researchers were motivated by a wish to develop the field of religious coping which would concentrate on how an individual makes use of his religious beliefs in order to comprehend and cope with harsh life situations. They attempted to develop a scale the scope of which would go beyond the relatively simplistic measures which had been employed to date and which typically included a small number of religious types of coping in broader and more general measures. Pargament et al. (2000) cite the example of the Ways of Coping Scale (Lazarus & Folkman, 1984) a 67-item coping scale which only includes two items which can be said to be of an overt religious nature.

A further innovative aspect of the RCOPE was the acknowledgment that religious beliefs can lead not only to traditionally emphasised positive dimensions (see for example Carver et al.'s (1989) review of religiously based coping strategies) but also ineffective or dysfunctional patterns of coping behaviour such as reappraising the stressor as the work of the Devil or pleading for G-d's direct intervention. The authors argued that these might well increase stress levels as opposed to improving coping abilities (Pargament et al., 2000).

The 105 items of the original scale were derived from existing measures, clinical literature and individual interviews, and the RCOPE was validated on a sample of 540 college students. Factor analysis was used to generate 17 factors or subscales which represented 17 different positive and negative styles of religious coping such as pleading for direct intercession, seeking support from clergy or reappraisal of G-d's power. Internal consistency on the 17 subscales ranged from 0.61 to 0.94 with only 2 factors falling below 0.80. The subscale coping styles characterize relatively obvious forms of religious coping, however one of the subscales, 'religious helping' (rc15)

appears somewhat out of place. At first it is not apparent why attempting to provide spiritual support and comfort to others would necessarily be an effective way of coping with a harsh life situation but on reflection, helping others is a clear path to creating self-worth which could well be seen as an ‘antidote’ to the hopelessness which is one of the major difficulties present in such situations.

Table 5.4 shows the number of items, mean, standard deviation and reliability coefficient (Cronbach’s Alpha) for each of the 17 subscales of the original college student sample (Pargament et al., 2000).

Table 5.4: Descriptive statistics for original RCOPE questionnaire (Pargament et al., 2000)

Subscale	Items	Alpha	Mean	Std. Dev.
1) Benevolent Religious Reappraisal/Spiritual Support	8	.91	1.52	.80
2) Punishing G-d Reappraisal	5	.92	0.56	.76
3) Demonic Reappraisal	5	.90	0.27	.55
4) Reappraisal of G-d’s Power	4	.78	0.98	.79
5) Collaborative/Low Self-Directing Religious Coping	8	.89	1.77	.76
6) Active Religious Surrender	5	.92	1.03	.84
7) Passive Religious Deferral	5	.83	0.48	.58
8) Pleading for Direct Intercession	5	.84	1.25	.82
9) Religious Focus	5	.84	0.87	.69
10) Religious Purification/Forgiveness	10	.93	1.14	.81
11) Spiritual Connection	3	.81	1.09	.86
12) Spiritual Discontent	6	.88	0.50	.66
13) Marking Religious Boundaries	4	.61	0.89	.66
14) Seeking Support from Clergy/Members	5	.90	0.74	.84
15) Religious Helping	6	.90	1.16	.83
16) Interpersonal Religious Discontent	5	.82	0.28	.49
17) Religious Direction/Conversion	10	.94	0.71	.74

The RCOPE items and instructions were translated into Hebrew by two independent bilingual psychology students. It was then back translated by an additional two bilingual students. Finally an independent judge was asked to seek out disagreements in the translation process thus when a discrepancy was discovered, the judge was asked to make the final decision as to the most accurate translation. Since this was apparently the first time that the RCOPE had been translated into Hebrew, the

researcher felt it pertinent to run a pre-test of the Hebrew version with 8 acquaintances who were asked to remark on the following questions:

- How long the questionnaire took to complete?
- Were the instructions clear?
- Was each individual question clear?
- What the questionnaire was interested in?
- Did the questionnaire become tiresome?
- Additional comments
- Font, print size etc.

The overwhelming responses to the pre-test were comments regarding the extensive length of the questionnaire and the repetitive nature of some of the items. In response to these comments and together with the knowledge that eventually the participants would be requested to answer a very long set of questionnaires, the researcher looked for ways of reducing the length of the scale whilst not impairing its quality or efficacy. The result was to reduce the RCOPE by 18 items leaving a total of 87 items. The items that were taken out fulfilled two requirements: a) they related to a subscale which contained a relatively high number of items, and b) they strongly resembled another item and therefore could be said to be repetitive. In addition two further items were removed which Pargament himself indicated were not retained in the 17-factor model of the RCOPE. Thus the final number of items was 85. Table 5.5 shows the number of items and reliability coefficient (Cronbach's alpha) for the Hebrew (85-item) version of the RCOPE for the sample used in the present research (N=124).

Pargament (2000) also suggested that his fifth subscale which related to collaborative coping was more significant in its inverted form (5-) referring to situations in which

the participant was coping by actively dealing with the situation but expressly **without** G-d's help.

Twelve of the subscales showed clearly satisfactory alpha scores ($>.7$) and the remaining five had alphas ranging from .46 to .67. Although these figures are somewhat low, they may be regarded as marginally satisfactory given the small number of items (3-5) in each section (Loewenthal, 2001).

Table 5.5: Reliability statistics (per subscale) for the Hebrew version of the RCOPE

Subscale	No. of items	Alpha
1) Benevolent Religious Reappraisal/Spiritual Support	8	.73
2) Punishing G-d Reappraisal	3	.79
3) Demonic Reappraisal	4	.87
4) Reappraisal of G-d's Power	4	.54
5- Actively dealing with the situation without G-d's help	5	.88
6) Active Religious Surrender	5	.90
7) Passive Religious Deferral	4	.75
8) Pleading for Direct Intercession	5	.46
9) Religious Focus	4	.82
10) Religious Purification/Forgiveness	9	.89
11) Spiritual Connection	3	.53
12) Spiritual Discontent	5	.83
13) Marking Religious Boundaries	4	.56
14) Seeking Support from Clergy/Members	5	.67
15) Religious Helping	5	.77
16) Interpersonal Religious Discontent	5	.74
17) Religious Direction/Conversion	8	.82

The participants were requested to respond to how in the past they had reacted to negative life events. They were presented with a list of 'religious coping statements' and instructed that each item relates to a particular way of coping. The participants were asked to rate to what extent they did what the item suggests on a four-point Likert scale rating ranging from 1 "not at all" to 4 "a great deal". Examples of religious coping statements are: "prayed for a miracle", "questioned the power of G-d" and "worked together with G-d as partners".

Israel Index of Potential Suicide (Self Assessment Questionnaire - SAQ)

This scale is based on Zung's Index of Potential Suicide (1974). It was adapted for use in Israel by Bar-Joseph & Tzuriel (1990) and includes the items from Zung's scale which were shown to discriminate significantly between suicidal and non-suicidal groups (see Appendix 5). The 29 items are categorized into 3 basic groups: depression (10 items), anxiety (5 items), and emotional status (6 items). In addition a further 8 items specifically regarding suicide were included from the original scale. The scale was presented so that these specific questions gradually increased their level of directness - for example the first of these items dealt with the idea of suicide by way of projection "how often do you think that other people think about suicide?" The next item in this section refers to the actual act of suicide but still on a level of projection: "how often do people who think about suicide actually kill themselves?", and only then do the items enquire about the participant's personal experiences. The first 27 items offer a choice of responses on a 5-point scale ranging from never (1) to most, or all of the time (5). Two items enquiring about admitting suicide ideation to someone else, and actual suicide attempts were rated as never, once, twice, three times and more than three times, and the final question which enquired if the participant had known anyone who had committed suicide was rated as yes or no. In order to avoid a set response, half of the items are stated positively and half negatively. As part of the statistical commutations the results were calculated so that a high score indicated a higher level of suicide ideation. The questionnaire was titled "Self Assessment Questionnaire" and in the instructions the participants were asked to rate a series of statements which relate to how they feel and how they see themselves.

The scale was found to have a reliability coefficient of .82 (Cronbach's alpha).

Suicide Acceptance Scale (ASQ)

The suicide acceptance measure used in this research was based on a scale developed by Diekstra & Kerkhof (1989).

Although it is intuitively possible that an individual's attitude to suicide is significantly related to the probability that the individual will attempt to commit suicide himself, the research area of suicide attitudes and acceptance appears to have been relatively neglected. One particularly salient study was carried out in Israel by Stein et al. (1992). They found that an increased risk of suicide was associated with a more positive or accepting attitude towards others' suicide. In addition they showed that suicidal behaviour was significantly associated with **both** an outlook which does not necessarily see others' suicide as shameful, **and** with an increased ability to form friendships with people who in the past had attempted to kill themselves.

Together with the lack of research in this field, attitude scales developed to measure suicide attitudes are also extremely scarce and in this analytically bleak environment Diekstra & Kerkhof (1989) set about developing SUIATT, a detailed suicide attitude questionnaire. The SUIATT was in some respects a response to an earlier attempt by Domino et al. (1982) to develop a suicide opinion questionnaire (SOQ) which Diekstra & Kerkhof viewed as problematic:

“Based on the information provided by the authors, the psychometric and theoretical value of the SOQ is, however, difficult to assess and might even be questionable”

(Diekstra & Kerkhof, 1989, p.91)

The original measure was based on the understanding that suicide is a goal-directed behaviour and as such, attitudes towards the suicide act would vary greatly if the perpetrator himself, someone close to the perpetrator, or an unrelated stranger were

being questioned. The perpetrator may see his action as the only option available to attain his goal whereas an impartial judge or a close family member might see his action as achieving a vastly different result (Diekstra & Kerkhof, 1989). In the light of this understanding Diekstra & Kerkhof developed a measure which would pose questions to the participant whilst asking him to respond in three different roles: 1) as if he himself were the perpetrator, 2) if the perpetrator were a close family member or 3) as an impartial judge of the situation described. The result was a questionnaire in which the participant was presented with 18 harsh life situations. He was requested to judge/predict if he, a member of his family, or people in general would commit suicide in such circumstances. Examples of the situations were “if you were suffering from an incurable disease...” or “if you discovered that you could never have children...”

For the purposes of the present research the suicide situations were translated into Hebrew and some technical changes were made to the format of the questionnaire. The changes were made to improve the clarity of the measure and to make its application simpler for the participant. When a pre-test was carried out with eight psychology students they complained that the measure was cumbersome and confusing and therefore tiresome. In the light of these comments further technical changes were made so that the eighteen situations were reduced to ten items which were presented in five separate sections, for example: “does someone have the right to commit suicide if?” or “how probable would it be for the person most near and dear to you to commit suicide if?” In each of the five sections the participant was asked to respond on a four-level Likert scale which corresponded to each specific question. For example in the section which asked “does someone have the right to commit suicide if?”, the four available responses ranged from “they have the absolute right” to “they never have the right”, and in the section which asked

“how probable would it be for the person most near and dear to you to commit suicide if?”, the responses ranged from “very probable” to “very improbable”.

The responses were scored so that a low score indicated a more positive/accepting attitude to suicide.

The new format Hebrew version of the SUIATT scale which was used in the present research (see Appendix 6) was found to have a reliability coefficient of .87 (Cronbach's alpha).

Procedure

The heads of each of the four institutions were approached and after the research was explained to them in some detail they were asked if they would be willing for their students to take part in the study. All four heads agreed although various conditions were set out. One of the *Roshei Yeshivot* (institution heads) requested that at the end of the study, the researcher would return and present a lecture on the findings and on the topic of Judaism and suicide. Another requested a specific individual analysis of his students according to the parameters of the general research. Here it was decided to decline the request on grounds of discretion and confidentiality and instead the researcher sat with each institution head to discuss the general trends which the study had raised and areas which might be of interest to the Rabbis. In addition the researcher offered an alternative suggestion which was consequently adopted in all of the institutions whereby the participants were informed that if the questionnaires raised disturbing thoughts, worries or concerns, then they were at liberty to speak to the researcher after the questionnaire session, and in addition the researcher's telephone number was written clearly at the front of the room and the participants were invited to turn to the researcher with any questions or concerns. On two

occasions participants **did** telephone the researcher admitting that recently they had seriously thought about suicide. During the course of the conversations it became apparent that in both cases the participants were involved in intensive therapy programmes, one at a psychiatric hospital and one with a private consultant clinical psychologist. After hearing these details regarding their therapy, the researcher – a qualified practicing clinical psychologist himself - felt assured that the cases were being dealt with on a sufficient level and it was considered enough to suggest that they discuss their latest concerns with their respective therapists.

Finally, in their positions as heads of the institutions and as eminent rabbinical authorities, **each** *Rosh Yeshiva* or *Rosh Midrasha* was requested to grant ethical approval for the research. The Rabbis were approached twice, once before the qualitative study and again before the questionnaires were given out. After listening to a detailed account of the research procedures and receiving a copy of the questionnaires they gave their ethical approval for the study and for the participation of their students. This approval was deemed sufficient by the relevant authorities at the University of London.

On the agreed day the head of the institution or a senior teacher announced in the study hall that the *Yeshiva* or *Midrasha* was cooperating with a research programme relating to how religious people cope in harsh life situations. He requested volunteers to complete the questionnaires expressing an opinion that the research was valuable and important. In all of the institutions there was a high level of compliance and the 35 participants who were sought in each one were easily found. Approximately 80% of the initial forum of students showed willingness to take part in the study and a cursory investigation as to causes for “opting out” revealed reasons such as prior engagements and tiredness rather than explicit resistance or discomfort in taking part in the research. It was apparent that the support that the *Rosh Yeshiva/Midrasha* gave

to the project was a key factor in the willingness of the students to take part. In one instance the *Rosh Yeshiva* in his introduction commented that time spent in filling in the questionnaires should definitely **not** be seen as *Bitul Torah* (time which is wasted and could be spent on *Torah* study) since it was clear that the research was valuable and related to the holy value of *Pikuach Nefesh* (the paramount *Torah* principle of saving life). Such a comment not only relaxed those serious students who were indeed harbouring such a doubt but also sent a very clear message to all the students as to how the *Rosh Yeshiva* viewed the research.

The participants were told that they were taking part in a study which was looking into the way that religious people cope in different circumstances particularly in harsh life situations. In addition they were given some technical details such as the number of separate questionnaires and an approximate time range for completing the questionnaires (45-75 minutes). All of the questionnaires were completed in the presence of the researcher. This allowed the participants to verify any queries but also ensured that the questionnaires would indeed be completed.

Results

The following table gives descriptive statistics for each of the scales which were employed in the research. It is worthwhile noting that in all of the scales there were only minimal (non-significant) differences between the statistics for the whole sample and those for the male and female sections of the sample.

Table 5.6: Descriptive statistics for each of the scales used in the present research

Scale		Mean	Min.	Max.	Std. Dev.	N
Religious Belief	Total	44.70	30	51	5.30	124
	Male	43.50	-	-	5.48	70
	Female	46.23	-	-	4.68	54
Religious Behaviour	Total	.813	0.46	1.12	0.12	124
	Male	.817	-	-	0.13	70
	Female	.807	-	-	0.11	54
Religious Motivation	Total	184.57	95	261	30.64	124
	Male	177.54	-	-	31.44	70
	Female	193.68	-	-	27.25	54
Religious Coping	Total	199.51	137	255	23.13	124
	Male	195.66	-	-	23.48	70
	Female	204.51	-	-	21.89	54
Suicide Ideation (SAQ)	Total	63.93	44	92	9.54	124
	Male	64.71	-	-	9.79	70
	Female	62.91	-	-	9.20	54
Suicide Acceptance (ASQ)	Total	79.62	46	129	12.95	124
	Male	80.35	-	-	13.25	70
	Female	78.66	-	-	12.61	54

As a preface to the statistical analysis, table 5.7 presents the overall correlational pattern of the scales used in the research including each of the religious coping subscales:

Table 5.7: Correlation matrix for each of the scales used in the present research

	r. belief	r. behav.	r. motiv	s. accept.	s. ideat.	rc1	rc2	rc3	rc4	rc5- yuyuyu	rc6	rc7	rc8	rc9	rc10	rc11	rc12	rc13	rc14	rc15	rc16	rc17
r. belief	-	.512**	.167	-.354**	-.222*	.482**	.166	.128	-.221*	-.566**	.356**	.129	.477**	-.132	.372**	.396**	-.266**	.426**	.343**	.291**	-.148	.203*
r. behav.		-	.025	-.270**	-.153	.345**	.005	.142	-.376**	-.352**	.357**	.98	.299**	-.069	.213*	.356**	-.336**	.503**	.176	.288**	-.192**	.215**
r. motiv.			-	.043	.035	.196*	.240**	.073	-.051	-.197*	.081	.205*	.423*	.090	.252**	.329**	.071	.233**	.378**	.378**	.206*	.194*
s. accept.				-	.330**	-.321**	.155	.160	.278**	.245**	-.361**	-.001	-.173	.125	-.166	-.260**	.422**	-.242**	-.298**	-.302**	.118	-.128
s. ideat.					-	-.177*	.335**	.077	.152	.239**	-.066	.211*	-.256**	.230*	.000	-.259**	.364**	-.113	-.239**	-.333**	.150	.073
rc1						-	.136	.079	-.282**	-.529**	.471**	.033	.472**	.261**	.586**	.556**	-.460**	.392**	.291**	.376**	-.120	.498**
rc2							-	.208*	.093	-.119	.077	.239**	.082	.136	.309**	.063	.338**	.118	.001	-.010	.127	.222*
rc3								-	.141	-.130	-.054	.312**	.124	.171	.114	.179*	.180*	.125	.091	.207*	.157	.111
rc4									-	.319**	-.238**	.144	-.228*	.096	-.316**	-.320**	.400**	-.171	-.167	-.161	.257**	-.203*
rc5-										-	-.234**	-.147	-.462**	.056	-.368**	-.385**	.327**	-.276**	-.190*	-.252**	-.328**	-.160
rc6											-	.074	.396**	.045	.275**	.299**	-.279**	.195*	.108	.203	-.292**	.270**
rc7												-	.060	.162	.115	.13	.190*	.214*	.149	-.007	.162	.192*
rc8													-	.073	.289**	.317**	-.234**	.216*	.240**	.253**	-.267**	.264**
rc9														-	.321**	.196*	.084	.122	.045	-.010	.176	.368**
rc10															-	.582**	-.157	.364**	.327**	.379**	.060	.645**
rc11																-	-.229*	.578**	.594**	.673**	.078	.467**
rc12																	-	-.236**	-.089	-.148	.368**	-.045
rc13																		-	.490**	.477**	.113	.394**
rc14																			-	.564**	.298**	.327**
rc15																				-	.185*	.315**
rc16																					-	.133
rc17																						-

Associations between *religious belief, religious behaviour, suicide ideation and suicide acceptance.*

The first stage in the analysis was to examine the relationship between *religious belief and behaviour* and *suicide beliefs* (table 5.8). The results show that in general both *religious belief* and *religious behaviour* are associated with lower levels of *suicide ideation and acceptance*.

Table 5.8: Correlations between *religious belief and behaviour* and *suicide ideation and acceptance*.

	Suicide Ideation (SAQ) correlations	Suicide Acceptance (ASQ) correlations
Religious Belief	$r = -.222^{**}$	$r = -.354^{***}$
Religious Behaviour	$r = -.153^{*}$	$r = -.270^{***}$

* marginally significant ($p < 0.1$) ** $p < 0.05$ *** $p < 0.01$

In the light of this general association between religiosity and low suicide beliefs, the research proceeded to ‘focus in’ on the specific areas within the general religiosity picture which were responsible for this effect, i.e. to delineate which specific aspects of *religious belief and behaviour* are most strongly associated with *suicide ideation and acceptance*. In an attempt to clarify the picture and in the wake of issues which were salient in the qualitative interviews, the analysis first turned to the area of *religious motivation*.

Associations between *religious motivation* and *suicide ideation and acceptance*.

When analysed with *suicide ideation and acceptance*, the *religious motivation* variable presented, on the whole, a very **weak** correlation pattern. Of the five motivational subgroups only *social motivation* exhibited a significant correlation with either *suicide ideation* or *acceptance* ($r=0.25$, $p<.001$). It is important to note that although religious motivation which is associated with *social* issues (such as a desire to comply with social norms or a need for social acceptance) was positively linked with *suicide ideation and acceptance*, religious motivation which is associated with *believing in a divine order* (such as a desire to do the right thing, to relate to G-d or to receive an eternal reward) had **no** prominent impact on suicide beliefs.

When it became clear that *religious motivation* was generally **not** a prominent factor in trying to explain the main effect of religiosity with suicide beliefs, the research turned to the other topic which was a salient feature in the semi-structured interviews, the area of *religious coping*.

Associations between *religious coping* and *suicide ideation and acceptance*.

When analysed with *suicide ideation and acceptance*, the *religious coping* subgroups presented a complex pattern of correlations (see table 5.9). Of the 17 religious coping subscales, 9 showed significant correlations with *suicide ideation* **and** *suicide acceptance*. Only one subgroup, *looking to religion to provide a new direction* (rc17) showed no significant relationship with either of the suicide variables.

Table 5.9: Significant correlations between the *religious coping* subgroups and *suicide ideation and acceptance*.

Religious Coping subgroups	Suicide Ideation (SAQ) Correlations	Suicide Acceptance (ASQ) Correlations
1	R = -.177**	r = - .321***
2	R = .335***	r = .155*
3	R = .077	r = .160*
4	R = .152*	r = .278***
5-	R = .239***	r = .245***
6	R = -.066	r = -.361***
7	R = .211**	r = -.001
8	R = -.256***	r = -.173*
9	R = .230**	r = .125
10	R = .000	r = -.166*
11	R = -.259***	r = -.260***
12	R = .364***	r = .422***
13	R = -.113	r = -.242***
14	R = -.239***	r = -.298***
15	R = -.333***	r = -.302***
16	R = .150*	r = .118
17	R = .073	r = .128

* marginally significant ($p < 0.1$) ** $p < 0.05$ *** $p < 0.01$

In general, certain *religious coping styles* are associated with low levels of *suicide ideation and acceptance* whilst others are associated with higher levels. Of the nine significant styles, five are associated with low levels of *ideation and acceptance*:

- *Redefining the stressor as benevolent and potentially beneficial* (rc1)
- *Seeking control by pleading to G-d to intervene* (rc8)
- *Spiritual connectedness* (rc11)
- *Appealing to spiritual leaders for support* (rc14)
- *Coping through supporting and comforting others* (rc15)

Conversely, the following *religious coping styles* were in general associated with **higher** levels of both *suicide ideation* and *suicide acceptance*:

- *Redefining the stressor as a punishment from G-d* (rc2)
- *Reappraising G-d's power, suggesting that G-d is not in control* (rc4)
- *Actively dealing with the situation without G-d's help* (rc5-)
- *Expressing anger and doubt towards G-d* (rc12)

Associations between religious coping patterns and religious belief and behaviour

As has been stated, the research, in general aimed at examining which elements of the religiosity variable are significant to suicidality. In order to tackle this issue systematically and in the light of the previously recorded results, it was important to observe which patterns of *religious belief* and *religious behaviour* are compatible with the various *religious coping styles* (see table 5.10).

Table 5.10: Correlations between *religious coping styles* and *religious belief and behaviour*.

Religious Coping Subgroups	Religious Belief Correlations	Religious Behaviour Correlations
1	r = .482***	r = .345***
2	r = .166*	r = .005
3	r = .128	r = .142
4	r = -.221**	r = -.376***
5-	r = -.566***	r = -.352***
6	r = .356***	r = .357***
7	r = .129	r = .098
8	r = .477***	r = .299***
9	r = -.132	r = -.069
10	r = .372***	r = .213**
11	r = .396***	r = .356***
12	r = -.266***	r = -.336***
13	r = .426***	r = .503***
14	r = .343***	r = .176*
15	r = .291***	r = .288***
16	r = -.148	r = -.192***
17	r = .203**	r = .215***

* marginally significant (p<0.1) ** p<0.05 *** p<0.01

The table reveals that several of the religious coping methods are strongly associated with high levels of *religious belief* and *religious behaviour*:

- *Redefining the stressor as benevolent and potentially beneficial (rc1)*
- *Relinquishing control to G-d (rc6)*
- *Seeking control by pleading to G-d to intervene (rc8)*
- *Searching for spiritual cleansing through religious actions (rc10)*
- *Spiritual connectedness (rc11)*
- *Marking religious boundaries and keeping to them (rc13)*
- *Seeking comfort from religious leaders (rc14)*
- *Spiritually supporting and comforting others (rc15)*
- *Looking to religion to provide a new direction (rc17)*

Conversely, the following religious coping methods were all associated with particularly **low** levels of *belief* and *observance*:

- *Reappraising G-d's power, suggesting that G-d is not in control (rc4)*
- *Actively dealing with the situation without G-d's help (rc5-)*
- *Feeling anger with G-d at what He has done and doubting His ability or will to improve the situation (rc12).*

Four of the coping styles bore no significant relation to *religious belief* **or** *religious behaviour*:

- *Redefining the stressor as a punishment from G-d (rc2)*
- *Redefining the stressor as the work of the devil (rc3)*
- *Passively waiting for G-d to control the situation (rc7)*
- *Engaging in religious activities to shift the focus from the stressor (rc9)*

When comparing tables 5.9 and 5.10 it appears that **eight key religious coping styles** are significantly associated with **both** *suicide ideation and acceptance* **and** *religious belief and behaviour* (see table 5.11). Five of the coping styles are associated with high levels of *religious belief and behaviour* and comparatively low levels of suicide beliefs:

- *Redefining the stressor as benevolent and potentially beneficial (rc1)*
- *Seeking control by pleading to G-d to intervene (rc8)*
- *Spiritual connectedness (rc11)*
- *Seeking comfort from religious leaders (rc14)*
- *Coping through supporting and comforting others (rc15)*

Conversely, three other coping styles were associated with low levels of *religious belief and behaviour* and comparatively high levels of *suicide ideation and acceptance*:

- *Seeing the situation as being beyond G-d's control (rc4)*
- *Deciding to actively deal with the situation without G-d's help (rc5-)*
- *Feeling anger with G-d at what He has done and doubting His ability or will to improve the situation (rc12)*

Table 5.11: Correlations between *religious coping patterns AND religious belief and behaviour AND suicide ideation and acceptance*.

Religious Coping Subgroups	Religious Belief Correlations	Religious Behaviour Correlations	Suicide Ideation Correlations	Suicide Acceptance Correlations
1*	r = .482***	r = .345***	r = -.177**	r = -.321***
2	r = .166*	r = .005	r = .335***	r = .155*
3	r = .128	r = .142	r = .077	r = .160*
4*	r = -.221**	r = -.376***	r = .152*	r = .278***
5-*	r = -.566***	r = -.352***	r = .239***	r = .245***
6	r = .356***	r = .357***	r = -.066	r = -.361***
7	r = .129	r = .098	r = .211**	r = -.001
8*	r = .477***	r = .299***	r = -.256***	r = -.173*
9	r = -.132	r = -.069	r = .230**	r = .125
10	r = .372***	r = .213**	r = .000	r = -.166*
11*	r = .396***	r = .356***	r = -.259***	r = -.260***
12*	r = -.266***	r = -.336***	r = .364***	r = .422***
13	r = .426***	r = .503***	r = -.113	r = -.242***
14*	r = .343***	r = .176*	r = -.239***	r = -.298***
15*	r = .291***	r = .288***	r = -.333***	r = -.302***
16	r = -.148	r = -.192***	r = .150*	r = .118
17	r = .203**	r = .215***	r = .073	r = -.128

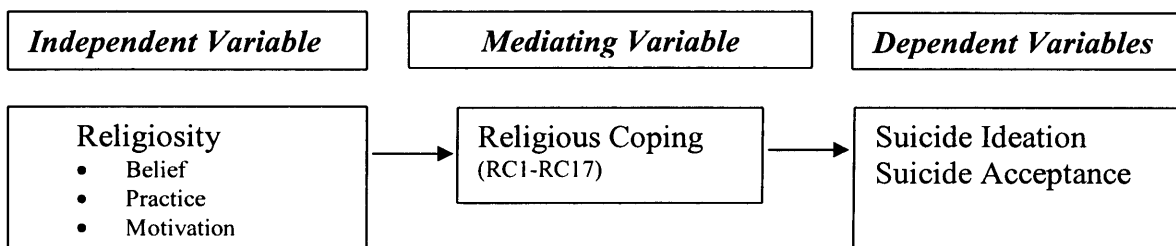
* marginally significant (p<0.1) ** p<0.05 *** p<0.01

The mediating model

The results suggested that a mediating model might be a useful tool in understanding the statistical findings: it seemed plausible that *religiosity* may be affecting *suicide behaviour* chiefly by its influence on *religious coping* styles. This understanding would indeed help to explain the results shown in table 5.8.

The usage of a mediating model is not entirely unheard in this field of research. Maltby et al. (1999) observed the relationship between six different categories of religiosity and three mental-health indicators in 474 students. Amongst the results the researchers noted that when five of the religiosity variables were regressed on the three mental-health indicators, only personal prayer (one of the religiosity categories) was consistently significant. The researchers concluded that personal prayer might be playing a mediating role in the relationship between religiosity and mental health.

In the present research, due to the importance of *religious coping* in understanding the relationship between *religiosity* and *suicide*, the research employed a mediating model whereby *religious coping* is a mediating factor which has a central effect on the relationship between *religiosity* and *suicide attitudes and ideation*:



The mediating model generates 4 basic hypotheses:

1. Some aspect of *religiosity* is related to *religious coping*.
2. Some aspect of *religious coping* is related to *suicide ideation/acceptance*.
3. Some aspect of *religiosity* is related to *suicide ideation/acceptance*.
4. The relationship between *religiosity* and *suicide ideation/acceptance* is modified by *religious coping*.

To further understand the relationship between these variables, and specifically the relationship between *religious belief and behaviour* and *suicide ideation and acceptance*, and to ascertain to what extent *religious coping* was a function of this relationship, the next stage of the analysis used multiple regression techniques:

The correlation analysis which was summarised in table 5.10 suggests that *religious behaviour* is associated with certain *religious coping* methods some of which effectively **buffer** against suicide:

- *Redefining the stressor as benevolent and potentially beneficial* (rc1)
- *Relinquishing control to G-d* (rc6)
- *Seeking control by pleading to G-d to intervene* (rc8)
- *Searching for spiritual cleansing through religious actions* (rc10)
- *Spiritual connectedness* (rc11)
- *Marking religious boundaries and keeping to them* (rc13)
- *Seeking comfort from religious leaders* (rc14)
- *Coping through supporting and comforting others* (rc15)
- *Looking to religion to provide a new direction* (rc17)

Conversely, some of the significant coping methods are associated with **high** levels of *suicide ideation and acceptance*:

- *Reappraising G-d's power, suggesting that G-d is not in control* (rc4)
- *Deciding to actively deal with the situation without G-d's help* (rc5-)
- *Feeling anger with G-d at what He has done and doubting His ability or will to improve the situation* (rc12)
- *Expressing anger with the Rabbis* (16)

Notwithstanding these associations, the **multiple regression analysis** as shown in tables 5.12 and 5.13 indicates that on its own, *religious behaviour* has **little direct** effect on suicide beliefs and its impact seems to be by way of its effect on *religious coping*.

Table 5.12: Multiple regression analysis. Independent variables = religious belief, religious behaviour and 17 religious coping values. Dependent variable = suicide ideation (saq)

Independent Variable	Beta	T	Sig.
Religious belief	-0.061	-0.515	0.607
Religious behaviour	0.008	0.076	0.939
Rc1	0.007	0.052	0.959
Rc2	0.210	2.199	0.030
Rc3	0.047	0.525	0.601
Rc4	-0.085	-0.861	0.391
Rc5-	0.080	0.692	0.491
Rc6	0.094	0.942	0.348
Rc7	0.113	1.234	0.220
Rc8	-0.174	-1.733	0.086
Rc9	0.135	1.400	0.165
Rc10	0.074	0.583	0.561
Rc11	-0.177	-1.274	0.205
Rc12	0.181	1.613	0.110
Rc13	0.083	0.725	0.470
Rc14	-0.078	-0.691	0.491
Rc15	-0.199	-1.666	0.099
Rc16	0.028	0.271	0.787
Rc17	0.067	0.587	0.558

Table 5.13: Multiple regression analysis. Independent variables = religious belief, religious behaviour & 17 religious coping values. Dependent variable = suicide acceptance (asq)

Independent Variable	Beta	T	Sig.
Religious belief	-0.212	-1.792	0.076
Religious behaviour	0.017	0.152	0.879
Rc1	-0.038	-0.276	0.783
Rc2	0.077	0.804	0.423
Rc3	0.144	1.599	0.113
Rc4	0.081	0.816	0.416
Rc5-	0.016	0.134	0.893
Rc6	-0.219	-2.190	0.031
Rc7	-0.092	-1.006	0.317
Rc8	0.124	1.236	0.219
Rc9	0.029	0.298	0.766
Rc10	0.046	0.362	0.718
Rc11	0.141	1.006	0.317
Rc12	0.251	2.226	0.028
Rc13	0.036	0.316	0.752
Rc14	-0.167	-1.471	0.144
Rc15	-0.219	-1.827	0.071
Rc16	-0.011	-0.105	0.917
Rc17	-0.024	-0.213	0.832

Religious belief, according to the correlation analysis (as shown in table 5.10) is also associated with certain *religious coping* methods some of which effectively **buffer** against suicide:

- *Redefining the stressor as benevolent and potentially beneficial* (rc1)
- *Redefining the stressor as a punishment from G-d* (rc2)
- *Relinquishing control to G-d* (rc6)
- *Seeking control by pleading to G-d to intervene* (rc8)
- *Searching for spiritual cleansing through religious actions* (rc10)
- *Spiritual connectedness* (rc11)
- *Marking religious boundaries and keeping to them* (rc13)
- *Seeking comfort from religious leaders* (rc14)
- *Coping through supporting and comforting others* (rc15)
- *Looking to religion to provide a new direction* (rc17)

Again, some of the significant coping strategies are associated with **higher** levels of *suicide ideation and acceptance*:

- *Reappraising G-d's power, suggesting that G-d is not in control* (rc4)
- *Actively dealing with the situation without G-d's help* (rc5-)
- *Feeling anger with G-d at what He has done and doubting His ability or will to improve the situation* (rc12)

In contrast to *religious behaviour*, according to the multiple aggression analysis *religious belief* **does** appear to have a limited effect on *suicide ideation* and *acceptance* whilst its main effect is also through its fostering of *religious coping* methods. *Religious belief* therefore might be said to affect suicide beliefs both directly and via its effect on *religious coping*.

In general the two multiple regression tables indicate that when the *rcope* variables are partialled out, there is only a limited effect of *religious belief* and no effect of

religious behaviour suggesting that *religious belief and behaviour* have a limited effect on *suicide* in their own right and that their effect is almost entirely due to the impact which they have on *coping styles*.

Discussion

More than a century ago Durkheim (1897) proposed that religion in general acts as a buffer against suicidal behaviour arguing that the effect is due to religion's intense social cohesion and framework of shared values. Although in general the results of the present study tend to validate Durkheim's basic premise, they indicate that the relationship between religion and suicide is more complex than he originally suggested.

In relation to the four hypotheses generated by the mediating model, the analysis in general appears to confirm the directions suggested.

Hypothesis no.1 - that "some aspect of *religiosity* is related to *religious coping*" - was corroborated: of the 17 *religious coping styles*, 12 are significantly associated with **both** *religious belief* and *religious behaviour* and 2 more are significantly associated with one of these two religiosity variables.

Hypothesis no.2 - that "some aspect of *religious coping* is related to *suicide ideation/acceptance*" - was positively confirmed: of the 17 *religious coping styles*, 9 were significantly associated with **both** *suicide ideation* and *suicide acceptance* and 7 more were significantly associated with one of the suicide variables.

Hypothesis no.3 - “some aspect of *religiosity* is related to *suicide ideation/acceptance*” - was positively verified. Although the main effect of greater religiosity being associated with negative beliefs about suicide was clearly apparent, on close examination the statistics offer an even more definitive and precise and perhaps surprising picture. Indeed, the results show that in general, *religiosity* has a greater impact on *suicide acceptance* than on *suicide ideation*: religious people are **less** accepting of suicide as a legitimate option **for other people** who are faced with harsh life situations but their religiosity is less relevant to their own suicide thoughts or intentions when **they themselves** are confronted with such circumstances. Furthermore, although it appears that those people who are generally **stronger** in their *religious beliefs* are **less** likely to see suicide as a response to a harsh life situation, poignantly, this effect is less pronounced for *religious behaviour*. Keeping *Mitzvot* therefore, is less critical to *suicide ideation* than believing in G-d.

Regarding this third hypothesis, although it was originally thought that *religious motivation* would be a critical factor, the results showed a negligible relationship with suicide measures. *Social motivation* however, did exhibit a significant correlation with *suicide ideation*. Although the impact of socially-based religious behaviour is clearly apparent, people whose religious behaviour is largely based on social factors such as a desire to comply with social norms or a need for social acceptance are, on the one hand, more likely to accept suicide as a legitimate option to harsh life situations **for other people**, but conversely **less likely** to maintain suicide thoughts or intentions when **they themselves** are confronted with such circumstances.

Hypothesis no.4 - that “the relationship between *religiosity* and *suicide ideation/acceptance* is modified by *religious coping*” - was in general also upheld by

the research results and as has been already noted, the multiple regression results indicate that when *religious coping* is partialled out, the religiosity variables show only a limited bearing on suicidality.

Notwithstanding these broad conclusions, the relationships were often more complex and within the general trends individual factors often **contradicted** the traditional buffering effect. For example, hypothesis no.2 stated that “some aspect of *religious coping* is related to *suicide ideation/acceptance*”. The actual results did indeed show that only 1 of the 17 *religious coping styles* showed no significant relationship whatsoever with **either** *suicide ideation* **or** *acceptance* and indeed 9 of the 17 subscales showed a significant correlation with both *suicide ideation* **and** *suicide acceptance*. Here however the results might be misleading. When the hypothesis is read in the context of the traditional buffering effect of religion against suicide, one might be forgiven for assuming that the 9 significant subscales are associated with specifically **low** levels of *suicide ideation and acceptance*. In fact, this is clearly not the case and whereas 5 of the styles are associated in this direction, 3 of those subgroups were associated with specifically **higher** levels of suicide beliefs. In other words, three styles of religious coping are associated with **higher** levels of suicidality. This example of the complexity of the paradigm is valid for the picture in general such that the initial traditional main-effect appears to be more complex than was perhaps first conceived.

When the results are combined, a picture emerges whereby two types of associations are active between the *religiosity* variables and the various *coping styles*, and a further two types of associations are similarly active between the different *coping styles* and *suicide ideation and acceptance*.

In the first stage the *coping styles* which are associated with **higher** levels of *religiosity* could together be broadly seen as those styles which emphasise coping by intensifying one's relationship with G-d either on a spiritual or operational level, or alternatively intensifying interpersonal activity within a religious framework.

The second group of coping styles which are associated with **lower** levels of *religiosity* could be broadly categorized as styles which either reduce or vilify one's relationship with G-d, or styles which emphasis active responses whilst removing G-d from the picture.

In the second stage the first group of coping styles which are associated with **lower** levels of *suicide ideation and acceptance* can be broadly defined as coping through strengthening or deepening one's relationship with G-d and then depending on the relationship to cope with the situation at hand.

The second group of coping styles which are associated with **higher** levels of suicide beliefs could be broadly categorized as coping styles which weaken one's relationship with G-d by making Him seem bad or weak.

It should be noted that of the 9 significant coping patterns, the positive/negative delineation of eight corresponded to Pargament's (2000) findings. Thus for example, both in the present research and in Pargament's analysis, *appealing to spiritual leaders for support* (rc14) was clarified as a positive coping style leading to, in the case of the present research, lower levels of *suicide ideation and acceptance*, and in other parallel research to general positive results - for example higher self-reported self-esteem and better psychological adjustment (Wright, Pratt, & Schmall, 1985). A further example is that the present research corroborated Pargament's (2000) classification of coping style no.12 *expressing anger and doubt towards G-d* as a negative style, which in the present research was associated with higher levels of

suicide ideation and acceptance and in other research was associated with more general negative outcomes such as poor mental health status and poor resolution of negative events (Pargament, 1997).

Whereas the qualitative interviews highlighted the interaction between *religiosity*, *religious coping* and *suicide ideation and acceptance*, the analysis of the questionnaires revealed a detailed and intricate picture of this interaction particularly emphasising the differences between how religious participants relate to their own harsh life situations as compared to the way in which they judge the coping strategies of those around them. In addition the importance of religious coping which was mentioned in so many of the interviews was empirically confirmed through the statistical analysis of the questionnaires. The combination of the qualitative and quantitative results led the researcher to draw elementary conclusions about how the Religious Zionist community respond to harsh life situations. The following chapter will discuss these conclusions and their importance in understanding the make-up and development of this particular community.

Chapter Six

Discussion

Introduction

The blending of the qualitative and quantitative sections of the research led to several clear and important conclusions which have helped to refine the understanding of the integral relationship between religiosity, coping, and suicidality in the group studied. Although coping is primarily viewed as a positive response to a crisis, the study has clearly shown that suicide is, in fact, also a way of coping. This tragic line of reasoning has led to a greater understanding of the coping processes and the part that religion and religious conviction has to play when a man of faith stands alone before an abyss of despondency and hopelessness.

The analysis of the qualitative and quantitative results led to **six essential conclusions** regarding the relationship between religiosity and suicide. These findings are listed below.

The findings

Perhaps most importantly the study confirmed that on the whole religion does indeed create a buffer to suicidal activity. This basic finding sustains a long trend of similar results originating with Emile Durkheim (1897), the French sociologist who, in 'Le Suicide' described how religion's tendency to provide social cohesion and a framework of shared values lead to religious people being better protected against the scourge of suicide than their secular contemporaries. For decades Durkheim was a

lone voice in the field of suicide and religion, but more recently his findings have been ratified, upheld and developed in countless studies undertaken by noteworthy researchers. In 1975 Gouldner suggested that religion's protective strength is rooted in its moral values which offer an alternative to society's materialistic or paternalistic merit system. More recently Durkheim has been the basis for further specific research which tends to corroborate the original conclusions. For example Stack (1983, 1991) suggested that for depressed participants religion can offer a level of meaning which can engender hope and which in turn can buffer suicide ideation (see also Breault (1988), Ellis & Smith (1991), and Pescosolido & Georgianna (1989) and many other studies noted in the earlier chapters of this research). The present study is another example of a research project investigating a certain aspect of the relationship between religion and suicidality. It too confirms the principal main-effect and as such it can be said to be in sturdy company!

The present chapter will list the major findings and attempt to offer understanding or explanations for the major trends revealed in the research:

❖ Notwithstanding the above central and fundamental finding, perhaps the most significant result of **both the qualitative and quantitative elements** of the present study was actually the relatively **low** impact of religiosity in the area of coping. Even in those results which were statistically deemed significant, for Orthodox people the actual impact of religious belief or behaviour on suicide ideation and acceptance was lower than one might have expected. The research repeatedly illustrated how **even** people who regard themselves as religious **find it difficult to access or exploit** their religiosity during harsh life situations – those times when perhaps it is most needed. It seems that for many religious people, at those critical moments, their religious beliefs, faith or convictions are dramatically **unavailable**. The interviews

corroborated this finding, but in addition offered a further insight. Several of the interviewees said that they were able to be comforted by G-d and utilize their faith in life and (more specifically) death situations involving **other people** and yet when their own mortality was in doubt, they often were **not** able to find help or comfort in G-d:

“When Y. (close friend) was killed I was in a real state but I clearly remember trying to make sense of the situation by forcing myself to remember that he was in heaven and that he was in a better place and he was close to G-d and all sorts of thoughts like that.”
(interview 6)

“**Interviewee** With me it was a stupid situation of my officers giving me a hard time and a combination of feeling totally misunderstood and totally alone. I remember very clearly feeling that if I were to kill myself then my officers would feel bad – it was a type of revenge.

MB And during that time when you were feeling rock bottom, did religion play any part – did issues of faith cross your mind?

Interviewee No not at all. As I said before when you get that low then religion is the last thing that you think about.”
(interview 10)

❖ It seems therefore that beyond the broad main-effect, the results indicate that **religiosity has a greater impact on suicide acceptance than on suicide ideation**. In other words a person’s level of religiosity is liable to affect how he or she views the theoretical or even practical option of someone else committing suicide, but it has much less of an impact on the likelihood of the individual committing suicide him or her self.

❖ The research indicates that **religious belief** is significantly inversely associated with **suicide ideation**. The strength of an individual’s religious belief is inversely and substantially related to the likelihood that he will consider suicide as a

response to a harsh life situation. Notably and not less significantly this association was **not observed** in relation to religious practices (keeping *Mitzvot*). These findings, which were mostly based on the responses to the questionnaires, were supported by a related outcome which was seen as a recurring theme in the semi-structured interviews: an individual's **relationship** with G-d is more relevant to his coping than religious **injunctions** or **prohibitions**:

“At the end of the day I think that my belief in G-d helped me cope but not because the *Halacha* says that you aren't allowed to commit suicide. It was in a more positive way. It was more like this isn't what *Hashem* wants me to do with my life!” (interview 7)

“..... it's about speaking to *Hashem*, having a relationship with Him.” (interview 11)

❖ The study revealed the critical role of **religious coping** (as defined by Pargament et al., 1997, 2000) **as a mediating factor between religiosity and suicide**. Whereas, for example, the direct association between religious behaviour and suicide ideation and acceptance was often insignificant and even negligible, **when religious coping was introduced**, the relationship became much more noteworthy such that religious behaviour was associated with religious coping, and religious coping was in turn related to suicide.

The strong relationship between religious coping and the management of emotional stress which was shown in the present study corresponds to previous research particularly by Pargament (1997), and Koenig et al. (1992). Koenig et al. reported that 41% of their participants responded that religion was either 'a primary factor in their coping' or 'the most important thing that keeps them going'. As was highlighted in Chapter four, Pargament et al. (1990) showed that religious coping was a better predictor of the psychological outcome of a harsh life event than religious

orientation. James & Wells (2004) suggest that the religiosity's impact can be seen as an element of coping, a contributor to coping and also a product of coping. Here too the present research tends to corroborate their findings specifically through the religious coping categories developed in the RCOPE by Pargament et al. (2000).

Notwithstanding the general main-effect, the following five specific coping styles were reported as being associated with lower levels of suicide ideation and acceptance, and higher levels of religious belief and behaviour:

- *Redefining the stressor as benevolent and potentially beneficial (rc1)*
- *Seeking control by pleading to G-d to intervene (rc8)*
- *Spiritual connectedness (rc11)*
- *Seeking comfort from religious leaders (rc14)*
- *Coping through supporting and comforting others (rc15)*

A noteworthy result was that some styles of religious coping can actually lead to, or be associated with, higher levels of suicide ideation and acceptance. Here too the research corresponds to previous studies, in particular to Pargament's work (1996) in the development of the RCOPE. Pargament spoke about the possible impeding effect of religion on the coping process, suggesting that depending on people's specific situations, religion may have advantages and disadvantages. In the present research three of the coping patterns were associated with **higher** levels of suicide ideation and acceptance, and **lower** levels of religious belief and behaviour:

- *Seeing the situation as being beyond G-d's control (rc4)*
- *Deciding to actively deal with the situation without G-d's help (rc5-)*
- *Feeling anger with G-d at what He has done and doubting His ability or will to improve the situation (rc12)*

Although it might appear strange that a coping measure can lead to higher levels of suicide behaviour, it should be noted that a religious coping measure was defined as any pattern of coping which was related in some way to a religious belief or activity (even if the relationship was negative!). In addition it is possible that the use of negative religious coping is a short-term, cathartic process unconsciously employed to cope with stressors and not a long term response based on personality traits and values which have been acquired through education or other didactic means.

❖ The qualitative study highlighted **religious motivation** as an **important element of religiosity** and as a significant part of religious coping. Although the quantitative study **did not confirm** this direction, one specific area presented significant results. The study suggests that those individuals whose religious motivation is principally related to social factors (such as a desire to comply with social norms or a need for social acceptance) grant **greater legitimacy** to people who choose suicide as an option but are poignantly **less likely** to choose that path when **they themselves** are in harsh life situations.

Reflections

Through the course of the research certain themes have developed which have helped to expand an understanding of the findings which are listed above. The following reflections attempt to draw these themes together presenting an overview of the Religious Zionist community which incorporates the results from both the qualitative and the quantitative studies.

1. Collective Identity

The Religious Zionist community in Israel comprises an extremely broad range of outlooks and standpoints on all its critical issues. Although from the outside there is an often idyllic picture of a homogenous group with a shared set of values and ideals, this is an illusion and notwithstanding tentative acquiescence on a few loosely-defined basic tenets, the umbrella brand-name actually covers a **vast array of religious and political ideologies** which are often not only incongruous but blatantly conflictual. In addition, the Religious Zionist community is a **society in transition**. It is characterized by an unusually **high rate of change** and sense of fluidity in almost all areas of life: from external dress codes to styles of spiritual searching, from religious-political emphases to styles of prayer. Almost all of the principal areas of religious life have come under critical scrutiny and have mostly undergone - and indeed are undergoing - critical developments and transitions. Crucial examples are: the role of women; the conflictual status of the Land of Israel (specifically the conflict surrounding the areas of *Yehudah VeShomron*), and the tension between the needs of the community and the desires of the individual. The community embodies a sense of constant transition and, more importantly, a sense of searching. Although these anthropological characteristics are apparent throughout the Religious Zionist population, they are particularly and predictably pronounced in the 18-24 age-bracket, the group observed in the present research.

At the risk of being judgemental, one might suggest that the community's diversity and fluidity are in fact symbols of healthy dynamism and that the apparent continuous development of the community is the secret of its vibrancy and vivacity. And yet with reference to this research, these characteristics relate directly to the issue of identity which appears to be so critical to the issue of coping in general and specifically to suicidality. Religion appears to be a key element in the development

of a stable identity on an individual level as Emmons (1998), suggests when he refers to the uniqueness of this relationship:

“Religion or spirituality can provide a unifying philosophy of life and serve as an integrating and stabilizing force in the face of constant environmental and cultural pressures that push for fragmentation.” (p. 70)

Similarly, Beit-Hallahmi (1989) sees religion as providing a bridge between individualist and collectivist identities. Leavey (1999), in a comparable study which relates the issues of social cohesion and identity with suicidality in the case of Irish-born people in Britain, suggests that the relatively unsettled nature of Irish migration together with a failure to develop a cultural identity, is a critical factor in the high level of suicide and suicide attempts:

“For the Irish in Britain, a lack of social cohesion and integration meshed with the inability to establish an authentic identity is likely to be the encompassing explanation for high rates of suicide in this group.” (p.171)

Suicidality as a function of social cohesion based on communal identity is emphasised by Orbach & Bar-Joseph (1993) in their review of a suicide prevention programme for Israeli adolescents. Most recently the Suicide Prevention Information New Zealand website (www.spinz.org.nz, accessed on 18/01/06) lists personal identity and cultural identity as chief resiliency factors.

It seems therefore that the very characteristics which help to create the community's healthy dynamism and refreshing sense of vigour also leave the Religious Zionist camp in a permanent state of **identity crisis**. The tenets of its identity appear to be under constant scrutiny and adjustment and this, together with the distinct lack of conformity or agreement concerning any or all of the pressing issues, leads to a lack of constancy or steadiness, the corner-stones of a stable identity.

For a community whose very identity is centred on a religious basis, which by definition identifies itself through the prism of belief, the stability and longevity of

that religious belief is critical to social cohesion. Indeed, the strength of the religiosity variable as a buffering agent is **intrinsically related** to the sense of identity which the variable affords and it is possible, therefore, that the fluidity of identity, which has been presented as one of the principal characteristics of the Religious Zionist community, is in part **responsible for the relatively low levels** of significance of the religiosity variable in the area of coping.

2. Individual Identity

If the lack of a stable and steadfast identity is the community's macro image, then the present research, and particularly the semi-structured interviews, highlight a parallel micro image on the level of the individual members of the community. As has been shown in chapter three, recently more and more youngsters are developing individualistic, non-conformist styles of Religious Zionism wherein they decide for themselves which *Mitzvot* to keep and where to allow themselves a greater degree of leniency **whilst still identifying themselves as religious, Orthodox Jews.**

“(Being religious...) first and foremost it's about belief, believing in the existence of G-d. After that, it's all the *Mitzvot* and the things that you have to do. The *Mitzvot* - or at least some of them - I find hard to relate to. For me being religious is about believing.

Well you've got all the *Mitzvot* etc. but that is on the technical level and to be honest I don't keep all the *Halachot*.” (interview 9)

This study has suggested that the issue of identity - and specifically religious identity - has evolved from an Eriksonian model (Erikson, 1968) which sees identity as a stable long-term function relatively resilient to change, into a function which has been described by Lifton (1993) as a flexible and adaptable variable responsive to external changes, transient and less steadfast:

“We are becoming fluid and many-sided. Without quite realizing it we have been evolving a sense of self appropriate to the restlessness and flux of our time.” (p.1)

This more recent and somewhat novel outlook on the identity variable offers an explanation for the recent developments which have been noted in the Religious Zionist community and which were outlined in chapter three and referred to as ‘**the fourth option**’.

As has been suggested the low identity level or the fluidity of the variable may well be weakening the ability of religiosity to fulfil its potential as a defence against suicide behaviour. As such this might be a possible explanation for the worrying results of relatively low levels of impact of religiosity on suicide ideation and acceptance.

3. Personal Licence

In addition, it is possible that the issue of religious identity is specifically relevant to suicide through a different angle: In chapter three it was suggested that an individual might see himself as being religious or Orthodox but somehow exclude certain areas of his life from this definition. Examples were given of specific leisure activities or certain types of behaviour between unmarried males and females. It seems possible that for some members of this community suicide is another area which somehow falls **outside of their religious definition** or identity. In other words, the individual could see himself as being religious but not incorporate the (very clear) religious prohibitions on suicide into his own personal religious framework. Such a situation could further help to explain the generally low level of significance of religiosity on suicidality within this community.

An additional option is that the wish to commit suicide comes together with a loss of faith. In other words, not that the individual is ignoring his faith or justifying his actions **within** a religious framework **but** that in reaching this point he has also lost his faith making the issues of belief and faith almost irrelevant:

“There’s no doubt that if someone is having doubts about their belief in G-d and they are really depressed, then suicide becomes more of an option.” (interview 1)

“I think that if someone has got to the stage when they would consider killing themselves then it means that their religious faith has slipped – the two don’t go together. You can’t lead a fully religious life with faith in *Hashem* and then try and kill yourself – it’s a contradiction. So if someone wants to commit suicide it means that they must be having doubts or some sort of breakdown in their faith otherwise they would never get to that stage.” (interview 3)

“To be honest I think that if someone religious commits suicide then he must be in some sort of religious breakdown - what they call a crisis of faith, otherwise it just doesn’t make sense.” (interview 16)

4. Motivation – The Significance of Insignificance

The questionnaires suggested **two significant and perhaps confusing** results concerning **religious motivation**. The primary significant result was its statistical **insignificance**. Although the thematic analysis of the semi-structured interviews identified motivation as an important factor in religiosity, the quantitative part of this study almost totally failed to show motivation as playing a significant role. Although any reasoning here is speculative, it is possible that either the general anecdotal importance of motivation when discussing religiosity is not empirically mirrored in the specific area of coping in harsh life situations, or that the questionnaires were not sensitive enough in this area.

The **only significant finding** in this area does however require some explanation.

The suicide tolerance or acceptance of people, whose religious motivation is principally related to social factors, relates primarily to **other people's** decision to kill themselves and is **not mirrored** by an increased level of **their own** suicide ideation. It therefore seems possible that socially-based religious values are relevant when **judging those around us** (suicide acceptance), however when it comes to the participant himself (suicide ideation), the social motivation becomes less pertinent and other values come into play. The result is the disparity found in the analysis of the questionnaires for this particular group (people whose religious motivation was principally related to social factors), between the values for suicide ideation and suicide acceptance.

5. Two Stages of Coping

Although it has been repeatedly suggested (Diekstra & Kerkhof, 1989) that suicide acceptance is proportionately related to suicide ideation, the results from the present study do not necessarily agree with this finding. One of the central findings was that **religiosity has a greater impact on suicide acceptance than on suicide ideation**. The implication here is that the religious beliefs and outlooks of an Orthodox person are **only robust enough** to influence how he responds to the suicide or the potential suicide **of someone around him**, but are not strong enough to impede **his own suicide thoughts**. Although as has been suggested, this finding may be related to the possible flexibility of religious identity in the Religious Zionist community - and indeed it would be fair to presume that if the communal religious identity was more stable or resilient then the buffer effect of religiosity against suicidality would be stronger - throughout the course of the research a further explanation for this effect has been observed in the notion of 'two stages of coping'.

Although not specifically noted in previous related studies, in the present research, and specifically in the qualitative interviews, the idea of ‘two stages of coping’ became especially prominent. Furthermore the interviewees repeatedly emphasised the fact that when faced with harsh life situations, the immediate or initial stage of coping **does not** incorporate religious ideas or feelings:

“M.B. And the suicide situation which you have described - do you recall any kind of thought input which came from a religious viewpoint? Did your being religious or believing in G-d affect your thoughts or feelings at that time?

Interviewee No it wasn’t relevant and my reasons for not doing it (committing suicide) were because I didn’t want to hurt anybody not because of any religious guilt or anything.” (interview 9)

The religious or spiritual content, if present at all, seems only to become relevant at a later, second stage of coping: The concept of religious coping which was so eloquently refined by Pargament et al. (2000) was, according to almost all of the interviewees in the present research, only in fact dominant **after** an initial and more secular form of coping:

MB You mentioned that your fiancé is in the army. Let’s say that you hadn’t seen him for three weeks and you were really really missing him and at long last he was coming home for *Shabbat* and you are really excited and then on Friday afternoon you get a phone call saying that he can’t get out for *Shabbat*. In such a situation do you think that because you are religious you would cope with the situation differently from someone who wasn’t religious?

Interviewee No, absolutely not (laughing). Nothing would help me then. I don’t know maybe after a while I might think that it’s a test for us and *Hashem* knows why He’s doing this - but definitely not at first. (interview 11)

A similar result was noted by Dein (2002). In the context of his research into traditional societies he noted that when faced with harsh life events people tend to first seek out pragmatic solutions and only then turn to healers etc. Specifically his

research investigated Lubavitch *Chasidim* and their responses to physical illness and he noted that ‘religious healing’ (specifically turning to the *Rebbe*) comes into play when secular or biomedical intervention has failed. Arguably, although Dein did not define his findings in terms of two stages of coping, he is in fact highlighting religious coping as occurring in a ‘second stage’ response to harsh life situations.

It should be noted that on an anecdotal level **there do exist** examples of religious people responding to harsh life situations within a religious framework. Many are the stories of people turning to G-d at times of danger or distress. One such example relating to the Twin Tower tragedy on 11th September 2001 in New York was recorded in a volume called “Even in the Darkest Moments” (Breier, 2002) the very title of which indicates the possibility of accessing faith at times of danger and distress. It must be noted however, that the narrative is anecdotal and as such not easily suited to the limitations of scientific research. In addition, perhaps it is not coincidental that the accounts relate predominantly to members of the Ultra Orthodox community and not to the Religious Zionist community:

“Without losing even a fraction of a second to look up, we ran for our dear lives. I decided to run a block and a half to South End Street and Liberty. While I was running for my life I was being bombarded by heavy shrapnel, glass and debris. **I remember praying that I did not make a fatal mistake by not taking immediate cover at the closest building like everyone else.**” (p. 34)

“As I heard and felt the severe pounding on the roof of the ambulance, I quickly dropped to the floor taking cover between the bench and the stretcher. In those few seconds, while waiting for the building to crush us to pieces, I knew that my life would be over in a matter of moments. I recited the *Shema* and my friend in the ambulance was crying to *Hashem* to have *Rachmonus* (mercy).

Even though I didn’t actually believe for a second that I had a chance in the world to make it out alive, for my family’s sake I couldn’t just sit still. **I had to try to do something to fulfil the *Torah*’s precept of *VaChai BoHem* – and you shall live by**

them (the *Mitzvot*). I pushed away the debris from my feet and managed to slide myself out of the door of the ambulance.” (p.35)

Notwithstanding the above reservations, such tales of religious fervour at critical moments of distress or fear, **either** serve to show that religious coping **is** a plausible immediate response **or** that such a response can as yet only be found in fantastical *mussar stories*⁹ which leave the reader aspiring to strengthen himself and improve his positive qualities and level of religious fortitude.

5a. It's Simply Irrelevant – The Soloveitchik Parallel

As has been noted, the two-stage coping configuration has not specifically been referred to in the psychological literature on coping. However it is paralleled in the Jewish outlook on coping as explicated by one of the most eminent rabbinic authorities of the present generation, Rabbi Joseph Soloveitchik. Soloveitchik (2003) discusses the Jewish path in mourning, particularly highlighting the two distinct stages of *Aninut* and *Avelut*. The first phase, *Aninut*, begins when a close relative passes away and ends after the burial, at which time the second stage, *Avelut*, commences. The period of *Aninut* is at most a matter of days and often only several hours whereas the period of *Avelut* lasts, with regard to certain aspects, for a whole year:

“*Aninut* represents the spontaneous human reaction to death. It is an outcry, a shout ... Beaten by the fiend, his prayers rejected, enveloped by a hideous darkness, forsaken and lonely, man begins to question his own singular reality... If death is the final destiny of all men, if everything human terminates in the narrow, dark grave, then why be a man at all?... why lay the claim to the singularity and *imago Dei* (the Divine image)?” (p.1)

⁹*Mussar* stories are tales which are devised to encourage the reader to improve himself particularly in reference to the way in which the reader fulfils the *Mitzvot* or treats his fellow man.

This is how Rabbi Soloveitchik graphically describes the initial stage of total grief in his seminal work on Jewish mourning, 'Out of the Whirlwind' (2003). He goes on to outline the *Halachic* outlook on the period of *Aninut* in which essentially the mourner is exempt from keeping the positive commandments. He further explains that during this initial period the close relative of someone who has died is referred to as an *Onan* and he is relieved of performing the *Mitzvot*. Finally, this great philosopher-Rabbi synthesises the emotional experience with its *Halachic* structure. He frames the *Halacha* as an outward expression of the inner anguish of the soul, personifying it as understanding and tolerating, willing to accept the unacceptable and forfeit demands which at any other time are absolute:

“In spite of the fact that the *Halacha* has indomitable faith in eternal life, in immortality, and in a continued transcendental existence for all human beings, it did understand like a loving sympathetic mother, man's fright and confusion, when confronted with death the mourner is relieved of his obligation in *Mitzvot* because he is incapable of performing them. He has simply lost his own sense of dignity; the focus of his personality has been lost. He is like a *chiresh*, *shoteh ve-katan*, the deaf mute, imbecile and minor who are all exempt from *Mitzvot*.” (p.13)

The second stage of mourning, *Avelut*, begins immediately after the interment and specifically at the point when the mourner recites the *Kaddish* prayer. As opposed to the first stage, *Avelut* centres not on a relinquishing of religious responsibility but expressly on an **increased** set of religious demands and requirements which are based around remembering and honouring the deceased.

“..... the *Halacha*, which showed so much tolerance for the mourner during the stage of *Aninut*, and let him float with the tide of black despair, now – forcefully and with a shift of emphasis – commands him that, with interment, the first phase of grief comes abruptly to a close and a second phase – that of *Avelut* - begins.” (p.4)

Soloveitchik seems to imply that the two *Halachic* stages of mourning are associated with (or perhaps even result from) two separate and very different emotional stages. If so, it seems reasonable to extend this understanding of mourning the death of a close relative to other harsh life situations. Thus a general Jewish outlook on coping would seem to acknowledge – indeed accept - an initial period of shock and grief during which religious symbolism and spiritual comfort are simply not relevant, followed by a second stage of coping which employs metaphysical religious crutches to support and comfort the wounded soul.

Clearly there are two almost opposing ways of treating this information on two stages of coping. Firstly it is possible to acknowledge the evidence from the semi-structured interviews together with the direction raised by Rabbi Soloveitchik, and to conjecture that indeed religious coping is **not relevant** as an immediate response to harsh life situations. This outlook helps to explain an additional finding from the present research, that generally religiosity has a greater impact on suicide **acceptance** than on suicide ideation - religious people are **less** accepting of suicide as a legitimate option **for other people** who are faced with harsh life situations but their religiosity is less relevant to their own suicide intentions when **they themselves** are confronted with such circumstances. If, as Soloveitchik appears to be suggesting, religious belief is **not relevant** at times of very acute distress, then a person's religiosity will indeed have less of an impact on his suicide ideation. Conversely, a person's more objective outlook on someone else's suicide (suicide acceptance) is much more likely to be affected by the observer's religious outlook.

The second option (below) is almost diametrically opposed to the first and is based on a rejection of the two stages of coping as an undesirable reality.

5b. An Educational Challenge

This alternative outlook is to see the results as an educational challenge. Religious coping is indeed not generally found in the first stage of responding to or coping with a harsh life situation but as opposed to the above thesis, in an alternative outlook, this is not necessarily a *fait accompli*, a psychological given, or 'the way of the world'. Instead it is representative of a flaw, a weakness in the belief system which needs to be acted upon and improved. The implication here is that the present situation is an unwanted condition especially when compared to the desired situation wherein a response to harsh life situations **would also be of a religious or belief nature**.

One of the prominent voices on this topic is Rabbi Shagar, the Rosh Yeshiva of the *Siach* Talmudic academy in Jerusalem. He has set out an agenda which is dedicated to a new style of education. In an in-depth and probing interview (Sharon & Mor-Yosef, 1993) he claimed that the Religious Zionist community has, together with the wider Israeli population, undergone fundamental strategic changes which have not been mirrored in educational agendas. In his role as the head of a Religious Zionist *yeshiva*, Rabbi Shagar referred to critical transformations which are crucial if the educational structures are going to address the needs of the contemporary Religious Zionist youth:

"It is necessary to transpose the language of learning such that it (*Torah* study) will afford the same level of significance and importance as it did in the past. To do this it is necessary to verify the basic, underlying foundations on which the *Talmudic* discussion lies. This primary analysis is often lacking and it is vital if we are to make the study really relevant to the lives of these students. If we can manage to understand why the Rabbis dwelt on each issue we will be able to see its relevance in our lives. We must be prepared to take *Talmudic* study a stage beyond the traditional dialectic argument and search for a meaning which is beyond the simple words."

(Sharon & Mor-Yosef, 1993 p.11)

Interestingly Shagar sees “salvation” as coming from a somewhat unlikely direction. He suggests that the *Midrashot* for girls are the most likely source of fresh educational directions. These *Midrashot* which were referred to in chapter three were also the source of the female participants of the quantitative part of the present research:

“It seems to me that the spearhead of this process is the new generation of female scholars and the girls’ *Midrashot*. Even though these institutions have yet to show significant *Torah* accomplishments, maybe the deliverance will come from within their walls. The fact that they are not subordinate or subject to any one specific intellectual or educational tradition, allows them the freedom to develop new ways in *Torah* learning, ways will eventually percolate back into the *Yeshiva* world.” (p.11)

Specifically Rabbi Shagar refers to the need to synthesize *limmud Torah* (*Torah* study) - and specifically the study of the Talmud - with an **existential outlook**, an understanding which does not stop at an intellectual plane but delves **deeper to levels of causation**. According to Rabbi Shagar such an outlook necessitates utilizing what might be seen as secular disciplines such as textual analysis and phenomenology.

A further example of the need to adapt educational outlooks in response to changes which are prevalent within the Religious Zionist community is the thesis proposed by Rabbi Amital, a dominant Rabbinic authority who until recently was the *Rosh Yeshiva* of *Yeshivat Har Etzion*. In a momentous discourse which was delivered at the *Yeshiva* on the festival of *Chanukah* (December, 2000), Rabbi Amital expressed his deep concern at the changes which he has noted over recent years amongst the Religious Zionist Youth.

“These are religious youth who have developed for themselves a new ideology.”

(p.1)

Rabbi Amital expands on this trend whereby the youth are keeping the *Mitzvot* not out of a sense of commitment but through an understanding that the lifestyle which the *Torah* or religious Judaism represents is superior to a life without *Mitzvot*. Their decision is, according to Rabbi Amital based on free will as opposed to commitment:

“Before us is a phenomenon whereby the yoke (of *Torah*) is accepted out of choice or preference and not through the profound insight that it is our specific heritage or destiny.” (p.1)

He explains that these developments are directly related to the cultural atmosphere in the whole of the Western world whereby liberal individualism is the foundation of the modern cultural ethos and where personal freedom and ‘the right to choose’ has led to the breakdown of any values which are related to commitment.

Rabbi Amital goes on to suggest that in order to combat these developments, *Torah* education must begin to emphasise the concept of *ne’emanut* or faithfulness. He suggests that faithfulness to G-d and the *Torah* - a concept which he compares to the loyalty or dedication that one feels towards a close friend - is the educational response to the individualism which is endemic amongst the youth of today and which leads to their inability to relate to the obligations of the *Torah* in the traditional terms of commitment or *Har KeGigit*.¹⁰

“The word obligation raises associations of coercion such that the idea is forced upon us as opposed to being part of us. In our sources the alternative word for obligation is *ne’emanut*, faithfulness.” (p.3)

Although Rabbi’s Shagar’s and Rabbi Amital’s arguments are **not specifically** related to the issues of coping, religious coping or suicide, it is clear that when Rabbi Shagar refers to the need to relate more to the students and the need to engender

¹⁰ The Babylonian *Talmud* (Tractate *Shabbat* 88,1) explains how, at Mount Sinai G-d forced the Israelites to accept the *Torah* as if he had placed the mountain like a bath-tub above their heads.

changes which will make the world of *Torah* more relevant, or when Rabbi Amital refers to the need for a pervasive, comprehensive response to the detrimental effects of Western culture on the Religious Zionist Youth, both are mirroring issues which have been raised in this study. Arguably, they are accepting or at least acknowledging the educational challenge referred to above: the need to find a broadly **educational** response to the difficulty religious people seem to find in accessing sources of faith and belief specifically when they are faced with harsh life situations.

This direction is perhaps substantiated by a story found in the book of Genesis: in chapter 23 the Scripture teaches that Sarah, Abraham's wife, has passed away. On hearing the news Abraham falls into a deep state of grief and mourning in the throes of which he is compelled to find a burial site for his wife. After he identifies a suitable location he must conduct a business meeting with the Hittite owners in order to close on a price for the plot. The relevant verse states:

“And Abraham **stood up from before his dead**, and spoke to the sons of Het, saying, I am a stranger and a sojourner with you: give me a possession of a burying-place with you, that I may bury my dead out of my sight.” (Genesis 23, 4)

The Rabbis have suggested that the phrase “Abraham stood up” indicates not that Abraham physically arose, but that he changed his mental status from self-centred, egotistical mourning to an interactive dynamic which involved relating with others. Abraham's moral and ethical standards dictated that he grant the highest possible level of honour and respect to any human being with whom he came in contact or with whom he had dealings. These principles were so deeply ingrained in his personality that even at the most harsh and agonizing moment in his life they were both relevant and accessible. Despite his pain and grief Abraham acted according to the principles of honour and respect by which he generally lived his life.

The Rabbis tell us that the stories relating to the forefathers should be seen through the principle of ‘the actions of the fathers’ are as lessons for the children’. The idiom which is based on the *Midrash (Breishit Raba, 48)* states that that which happened to the forefathers will happen to the children. The famous medieval commentator the Ramban also wrote in his commentary on Genesis 12, 6 “everything that happened to the fathers is a sign for the children”. In this light, the story of Abraham supports the idea that the two stages of coping revealed in the research is in fact an educational challenge: how to transfer the notion of religious coping from its present position in the second stage of coping to its desired and more effective role as part of the immediate response. Needless to say, when referring to the subject of suicide, this shift of emphasis is not a mere nuance but potentially a matter of life and death. For if the suicide is successful then the individual unfortunately does not survive in order to initiate the second stage of coping.

Neither Rabbi Shagar nor Rabbi Amital made the connection between the need for a new educational outlook and the area of religious coping. Indeed a broad and far-reaching survey both in professional literature and in the more popular sites on the internet revealed **no such linkage** and the present researcher can only wonder at the lack of understanding, specifically by the educational leaders of the Religious Zionist community, of the need to make religious coping more relevant and available, or in the context of the present study, to upgrade the rank or status of religious coping from the second to the first stage of coping.

Piercing this silence might well be a direction for suicide prevention which, in the final analysis, all research on suicide must strive for. From the very outset this researcher understood that a primary aim of the study must be to reduce, at least in some small way, the scourge of suicide. However arrogant this may sound, the gap in

the literature may indicate the specific contribution which the present research can offer to the field of coping in general, and specifically to the area of religious coping.

6. A Personal Relationship with G-d

When attempting to explain or understand the results listed in the first section of this chapter, it is important to note the relationship between two seemingly unrelated findings. The results showed that **belief in G-d** - and religious beliefs in general - are, in the context of the buffer effect of religiosity for suicide, **more significant than the keeping of the *Mitzvot***. In addition when the results of the religious coping questionnaires were analysed, they indicated that those methods of coping which were associated with the participant's relationship with G-d were particularly relevant and chiefly responsible for the positive main-effect of religious coping. When these two findings are combined it becomes clear that the most significant area of the religiosity variable is man's **relationship with his Maker**. In other words when faced with harsh life situations, the person who is able to turn to G-d, possibly relying on a previously-developed relationship, is the person who will be most protected. If this is so, then it is indeed not surprising that the results showed that **regarding suicidality**, religious belief is of greater significance than religious behaviour. Conversely, the results show that three of the coping styles (as listed above) are specifically associated with **higher levels of suicide ideation and acceptance and lower levels of religious belief and behaviour**. All three of these coping styles see the individual actively place a barrier between himself and G-d – either **cognitively** by framing the situation beyond G-d's control, or resolving to cope without G-d, or **emotionally** through the anger that the participant feels towards his Maker.

An additional finding derived from the questionnaires can be understood through the prism of **affiliation**. The results showed that **stronger religious belief** is associated with **lower levels of suicide ideation** but that this effect is **not as sturdy** when referring to **religious behaviour**. If the most significant factor in religious coping is an association or bond which a man feels with G-d, it makes sense that the belief variable which intuitively represents a person's relationship with his Maker will be more significant than the behaviour variable which is - at best – only a function of that belief. In other words, religious behaviour may be related to religious belief but it may also be related to a whole range of alternative causal or motivational factors (see chapter five and specifically Beit-Hallahmi & Argyle (1997) and Lazar et al. (2002)). Even if the religious behaviour is related to belief, the strength or intensity of the relationship can surely be seen in the belief variable in a much **purer form** thus making belief a better correlatory variable for religious coping.

This understanding of the fundamental importance of a personal, individual even intimate relationship with G-d may well stand to assist those educationalists who will accept the challenge of the two stages of coping which was cited above.

The results of the research appear to indicate that an emphasis on belief in G-d and a **personification** of that belief, will make G-d accessible even to the individual who is in the throes of despair. The rapport which Rabbi Amital refers to as “a relationship of faithfulness” is possibly a key to the standard which Abraham achieved when, in the midst of his bereavement and grief, he approached the Hittites. It is a key which might allow the members of the Religious Zionist community to *rise up* – as did Abraham - to their beliefs, to gain access to the tenets by which they run their everyday lives **even when** they are broken by grief or tortured by despair, thus

allowing them the opportunity to benefit from the fruits of their belief expressly in those times when they need them most.

“At that specific moment it might be hard to relate to something in those terms (terms of faith or belief in G-d) and to be honest it isn’t that easy at the best of times..... I’ve come to realize that that way of thinking comes from years of *Torah* study and lots of working on yourself – it’s a process.” (interview 1)

The study leads to an understanding that a religious person’s ability to cope with harsh life situations is a function of the synthesis of religious belief and religious coping. Man’s bond with his Maker, Rabbi Amital’s ‘relationship of faithfulness’ will define the style of religious coping which bears the greatest influence on how a person will deal with extreme and testing situations. This critical link between belief and resilience which was delineated in classical studies by researchers such as Pargament (1996, 1997) and Koenig (Koenig et al., 1992, Koenig et al., 2001) was also evident from the qualitative and quantitative results of the present study.

Chapter Seven

The Summer of 2005 - The Disengagement Plan

"The land of Israel was given to the Jewish people by G-d. It's not like any other country, it's holy, it's different."
Interview 3

At the same time as this research was being conducted a democratically-elected government in Israel voted on a disengagement plan for the *Gush Katif* area in Southern Israel, and the northern *Shomron* area. The two areas included twenty-one settlements or villages, the majority of which were populated by Religious Zionist communities. The Disengagement Plan involved a unilateral withdrawal from these areas after which they were to be handed over to the Palestinian Authority. The 8000 inhabitants were required to leave and offered a resettlement package. If they did not leave of their own volition by a certain date, a forced evacuation by the police and the army was to follow. What transpired in the summer of 2005 must, in the terms of the present research, be described as a harsh life situation for the vast majority of the Religious Zionists throughout Israel, and in particular for the people who were living in these communities, who were physically forced out of their homes, instantly becoming refugees within Israel. The crisis affected all the central functions of life - social, economic and religious.

It is inconceivable that a research project which involves investigating and understanding responses to harsh life situations within a particular group could ignore the single most traumatic event which has affected it since its earliest days.

The interviews and the questionnaires in the present study were administered well before the Disengagement Plan was carried out, so that from a strictly empirical standpoint the recent events had no impact on the study. Notwithstanding, all the participants in the study together with their friends, families and indeed their whole community were involved at one level or another in the events surrounding the eviction. Even those Religious Zionists (seemingly a small minority) who were in favour of the Disengagement Plan were still clearly affected by the harsh scenes which were screened daily on television and constantly broadcast on the radio, so it is fair to suggest that the Religious Zionist community **as a whole** went through a severe crisis of which, as yet, only the short-term consequences are apparent. Due to the recency of the events, no empirical research has yet been published. However, one volume ('Days of Disengagement', Meir & Rahav-Meir, 2006) recording eight in-depth interviews with key personalities involved in or affected by the Disengagement Plan has been published. Any other information has been gleaned from the press and the internet. In addition, the researcher confronted these events first-hand and held many informal conversations with young people who experienced the Disengagement on various different levels. The nature of the data meant that it was not feasible for it be collected according to any systematic design and it was gathered on an opportunistic basis. This limitation led to some thought about its inclusion in the dissertation and with this in mind the data has been included in this separate chapter. The alternative, which was to disregard or overlook this momentous and pertinent event entirely, seemed unacceptable.

In the context of the present research the Disengagement must be seen in the light of the calamity or tragedy which it represented both on a communal and an individual

level. How the crisis was coped with or handled and if religious coping was in any way evident must be examined.

There are a myriad of personal, anecdotal accounts of crises that people (especially young people) went through during this period. The reports range from families who were forced to leave their homes and communities, youngsters who went to *Gush Katif* in order to demonstrate against the Disengagement and who were themselves evicted, and religious soldiers who were faced with the impossible choice of either following the orders of their officers or obeying their conscience and their Rabbis. Each group expressed its own dilemmas and its own complex responses and yet after the withdrawal had been completed, the Religious Zionists **as a community** were more than anything else left in shock:

“Those who were left in trauma were the people who had been wearing orange (the colour adopted as a symbol of the struggle against the withdrawal). Mourning, confused, disbelieving, they watched with darkened eyes how life elsewhere in Israel returned to normal.”

(Meir & Rahav-Meir, 2006 p.10).

Many of the anecdotes referred to basic questions of belief: how could G-d let this happen? How was one to cope with the fact that prominent Rabbis publicly proclaimed that the Disengagement Plan would never actually take place? How was one to regard the pleading of a thirteen year-old who stood in a demonstration where 100,000 people together prayed to G-d to intercede and stop the Plan - a prayer which was apparently left unanswered? Indeed, in the Introduction to their book, Meir & Rahav-Meir (2006) write that above all else the movement to avert the Disengagement was of a religious nature:

“After all the security and political arguments, the struggle against the Israeli withdrawal from the Gaza Strip in the summer of 2005 was a religious struggle.”

(p.8)

The period was clearly a time of crisis and the coping mechanisms were diverse and wide-ranging. And yet, when observing the course of events, there appears to be a clear distinction between how people responded **before** the Disengagement - even up to the final moments where they could still deny that the edict would be carried out - and how people dealt with the fact **after** it had actually occurred. Again, the lack of fully systematic empirical data demands a degree of caution, but it seems that before the actual eviction religious activity against it was widespread. Mass prayer meetings, songs of religious imploring and even 24-hour fasts were all employed in an attempt to annul 'the evil decree'. Meir & Rachav-Meir (2006) interviewed an anonymous 18 year-old – one of thousands who spent the summer in *Gush Katif* until he was evicted. At one stage the interview related to the teenager's religious experiences:

"Friday afternoon, Sabbath eve and you finally arrive at 'the Gush'. Tell us your feelings at this time.

It was just amazing. I prayed to G-d: 'please G-d don't let me leave this place against my will.'

On *Shabbat* we listened to a talk by Rabbi Tal. He explained that G-d is our King and that the present struggle against the eviction is a struggle for the King. We are fighting so that His name won't be profaned. Rabbi Tal said that if everyone believes that the struggle is in the name of G-d then we will be victorious." (p.208)

"The prayer services were really emotional. I found myself paying attention to verses (from the liturgy) that I had never really noticed before - it was as if everything had been written for this period, as if the Disengagement was the centre of all our prayers. For example every day we say 'we won't be humiliated because we have trust in You'. Suddenly I understood that it means G-d, everyone is looking at us as if we are stupid to put our trust in you – don't make us look like idiots. Please just don't let it happen (the withdrawal) because if it does we really will be humiliated because we trusted in You." (p.212)

Many of the people involved were convinced on a level of pure belief that at the end of the day, the plan would not be carried out.

“Even at the end when I was in the Synagogue at *Neveh Dekalim* I was convinced that it wouldn’t happen. I even thought that the Messiah was about to come. I looked towards the door to check if he had come. I heard a loud noise outside and I thought that it was the sound of the shofar (the ram’s horn whose tones traditionally announce the Messiah’s arrival). It would have been so fitting for him to arrive now... Then they closed the doors of the Synagogue and the people by the windows were describing how the whole building was surrounded by hundreds of police and soldiers. Then they started talking to us via megaphones saying that anyone who left now wouldn’t be touched but otherwise we would be dragged out. We started reading chapters from the book of Psalms – slowly, slowly, desperately hoping that something would happen.” (p.224)

In contrast, **after** the Disengagement it seems that the religious fervour waned. The same teenager describes the final moments of the Disengagement and the period afterwards:

“I was in shock. It finally began to dawn on me that maybe the withdrawal was really going to happen. They told me to wash my face, have a drink and to get on one of the buses. I agreed but then I changed my mind and refused to get onto the bus and so they (the soldiers) carried me onto the bus. Everyone on the bus was broken. A Rabbi got onto the bus and told us that there was nothing else that we could have done and that it wasn’t our fault – we shouldn’t blame ourselves. The bus drove out of the *Gush* and at every junction there were people clapping and waving as if we were heroes but we hadn’t done anything. The world looked so strange. I began to realize that everything had carried on as normal. The bus stopped at *Mercaz Shapira* and there were hundreds of people waiting to greet us. They even threw sweets at us but I wasn’t interested in anything. I got off the bus close to my house and all the neighbourhood was there making a big fuss of me but nothing interested me at all. I think that I just wanted to go home.” (p.226)

What is most striking about this account is not what the young man reported, but what he did not say. The intense faith which the teenager had mustered when

attempting to avert the order was decidedly unavailable to help get him through the initial period after the Disengagement. As in the results of **the present research**, when dealing with the **actual crisis** (as opposed to the threat of the crisis), religious coping was less prevalent. Indeed, after the Disengagement many of the religious leaders themselves seemed to trade their prayers and other forms of religious coping for more secular means such as political solutions. A penetrating example is Rabbi Elyakim Levanon. Rabbi Levanon is the Rabbi of *Elon Moreh*, a settlement in the *Shomron* area of Israel and is also the *Rosh Yeshiva* of the *Hesder Yeshiva* which is situated within the settlement. One month before the Disengagement Rabbi Levanon transferred the *Yeshiva* in its entirety from *Elon Moreh* to a settlement called *Kfar Darom* in the area of Disengagement. All the teachers and students together with books and other equipment were set up in temporary accommodation, the students sleeping in tents and food being prepared in a field kitchen. Rabbi Levanon explained that not only was it important to show support for the indigenous population, but that the *Torah* which they would learn there would stand as merit for the region and help to protect it against the government's 'evil decree'. It was clear that the Rabbi's response to the situation was a religious one. The coping strategy was religiously based and the way to avert the Disengagement plan was first and foremost through prayer and the learning of *Torah*. In the terms of the present study Rabbi Levanon was clearly advocating and educating towards a religious coping strategy.

Eventually, after being evacuated from *Gush Katif*, the whole *Yeshiva* returned despondent and broken to the *Yeshiva* in *Elon Moreh*.

Two weeks later the Rabbi granted an interview to the two journalists who later published the dialogue together with seven others in the already referred-to book entitled 'Days of Engagement' (2006). The interview covered many aspects of the

Disengagement Plan and included questions about the period leading up to the actual eviction:

“The synagogue in *Kfar Darom* was full – thousands of people. It was an unforgettable experience. It was a very emotional service, full of expectations, of faith, of a feeling that G-d was with us. We studied together the passage from the Bible about the battle between Saul and Amalek and in particular the verse ‘and also the Eternal One of Israel will not lie nor change His mind: for He is not a man that He changes His mind’ (Samuel 1, 15, 29). This verse was deep in our hearts. Our prayers were spiritually uplifting and there were tears of devotion”. (p.26)

The journalists also asked about Rabbi Levanon’s outlook on the future in the light of the events of the previous months:

“The conclusion is clear. We (the Religious Zionists) have to take responsibility for all areas of Israeli life. For example until now in the field of education we only took responsibility for our own education. (The Disengagement has taught us that) we have to take responsibility for all forms of education – secular as well as religious. A further area where we have to act is the judiciary. We have to set up our own courts because we can’t rely on the impartiality of today’s judges. The media is another goal, and it is not an easy one. Today we have no place in the national media and we have to create for ourselves a niche here too.”

What you are suggesting is setting up a mini-state within the State of Israel, the judiciary, the media, education?

“No, not a State within a State. We have to take responsibility for the whole of the population. Until now we left everyone to the fate of the media, judiciary and secular educational systems. The reason that the Disengagement Plan succeeded was because the vast majority of Israelis are conditioned or should I say indoctrinated, by their exposure to these establishment bodies. This has led not only to a lack of *Torah* values but a lack of values in general and definitely a lack of love for the land of Israel. That is why the Disengagement Plan went ahead and that is why we have to respond by setting up alternative bodies to slowly readdress this flaw.” (p.20)

The difference between these two comments is striking. Whereas a religious approach was appropriate to attempt to prevent the Disengagement, once it had taken

place, religious coping was apparently less relevant and political and nationalistic responses were more pertinent.

As has already been emphasized these conclusions are **not** based on systematically gathered material and the quotations in 'Days of Engagement' might not comprehensively express Rabbi Levanon's views. However the ominous lack of religious coping strategies in the hours and days immediately after the Disengagement, are observable in this instance - **exactly as indicated by the results of the present research.**

One important difference between the events surrounding the summer of 2005 and the harsh life situations dealt with in this research is that more often than not the crises of the Disengagement were communal crises which were met in a very public way. (The differences in responses to public as opposed to private crises were referred to in chapter four regarding research on Hurricane Iniki in Hawaii (Sattler et al., 1994)).

This is particularly true up to the moment when it became clear that what had been a plan had become a reality. The events were typified by mass demonstrations, communal protests, rallies etc. Even in *Gush Katif* itself during the final days and hours all the accounts and narratives refer to common, shared experiences. Even after the Disengagement the communities strove to stay together and as such much of their coping has been social or communal. Arguably the coping which took place in solitude was the coping of 'the day after' for those young people who did not actually live in *Gush Katif* but only came to demonstrate and once evicted went their separate ways. Ironically most of the anecdotal evidence does not relate to this post-Disengagement period: unless specifically asked, most preferred to talk and write about their experiences during the Disengagement **and not after it.** The only

evidence relating to the latter period, are press reports which have begun to appear regarding the problems which these youngsters are facing. A glaring example is an article in the only English daily newspaper in Israel, the *Jerusalem Post*. In March 2006 Rafael Frankel, a correspondent for the newspaper, wrote an article about a teenage girl who had been evicted from her home in a settlement called *Neveh Dekalim*:

“For two weeks after the Disengagement, Sabir Atias, couldn’t get out of bed in the morning. She broke out in skin rashes, cried for days, and fell into a depression no one could help her escape.

Six months later Atias’s smile, so conspicuous during her days in *Gush Katif*, has returned..... ‘but’ as she told *The Jerusalem Post* ‘I’m tougher than I was before. Things that would have broken me before don’t touch me now.’

As disheartening as her comments sound, Atias is among the better adjusted of the youth from *Gush Katif*, who, six months after disengagement, suffer a wide range of psychological problems, according to social workers and youth group leaders who work with them on a daily basis.

A majority of the teens have been receiving poor grades, fighting with their parents, and experiencing feelings of betrayal, disillusionment and alienation. Others, social workers said, have contemplated suicide, been victims or perpetrators of rape and incest, exhibited signs of eating disorders, or forsworn school altogether.

‘The teens are going through a huge identity crisis,’ said Haiya Rabinovitch, a social worker who heads a team of ten social workers hired by the Committee of *Gush Katif* Settlers to work with the evacuees. These feelings have led to a huge number of teens being unable to concentrate in school while those in the army are constantly moving around and are unable to settle down.’

‘There was a time when I read the paper every day, but now it doesn’t matter to me at all,’ Atias said. ‘I don’t care about the state. I still care about the people, but whatever happens now, it wouldn’t matter to me if I lived outside the country. No one is treating us like we deserve. The government, the whole system, the people, they betrayed us. They didn’t care enough.’” (Jerusalem Post 12/3/06)

The Disengagement Plan left the majority of the Religious Zionists in Israel shocked, broken and genuinely concerned about the future. Not only was a central

precept of the Religious Zionist dream under threat, but the Plan seemed to highlight the schism between this community and the secular population of Israel. The accuracy or relevancy of these fears is yet to be verified – indeed only history will tell if the summer of 2005 marked the beginning of a new era of geographical reductionism and unilateral withdrawals or a mere glitch in the historical process of the Jewish people returning to its ancient homeland. What is certain is that for many religious people the aftermath of the crisis was borne **without spiritual support**. The religiosity which to a degree defines the community was once again apparently unavailable when they needed to console their grief or heal their spiritual and emotional wounds.

Chapter Eight

Conclusions

A Personal Reflection

A researcher's religious identity together with his social position, his political views and his personal situation is bound to affect any research which he undertakes. The threat to the validity of research by factors other than the relevant independent variables is problematic in most areas of science and particularly in the social sciences.

“Factors such as motivation, knowledge, expectations, and information or misinformation about the study can be powerful influences on behaviour. Extra-experimental factors may significantly bias researchers' behaviour, affecting not only the experimental procedure but also the analysis and interpretation of data.”

(Graziano & Raulin, 1989, p.182)

In an endless striving towards clean or pure research, science has developed complex procedures intended to annul or at least minimize the effects of these individual personal variations. Single and double blind procedures, multiple observers and deception are just a few examples of such techniques.

In the present research the researcher's background as a religious, Orthodox Jew identifying with the Religious Zionist community was particularly relevant and these personal circumstances seemingly had both positive and negative impacts on the development of the research. Similarly his clinical training had a considerable bearing on the course of the study.

From the very outset the field of research was affected by the researcher's clinical background combined with his religious orientation. A sharp increase in the number of suicide cases from within the Religious Zionist community which were either

referred to his private clinic or to the state psychiatric hospital where he worked led to the inception of the research and since then the continuous stream of cases served only to augment the motivation and the incentive to develop the research field and potentially to speed up the development of prevention directions.

The researcher's clinical skill and experience were clearly valuable during the qualitative semi-structured interviews. Although the aims of the interviews were far from clinical, the questions did contrive to lead the participants to a high level of self-exposure. Clinical skills were useful both in conducting the interviews and in giving confidence that the study was totally anonymous and that ethical standards regarding confidentiality and disclosure would be absolutely respected.

Interestingly this is not the first time that the study has referred to countertransferential feelings of the researcher. In chapter two of the present research, Schultz-Ross & Gutheil (1997) were cited as suggesting that the simplification of the religiosity variable and the omission of questions regarding religion and religiosity in the vast majority of suicide questionnaires may be rooted in the clinicians themselves. They proposed that historically, particularly in the field of religion and suicide, researchers' sensitivities and intra-personal conflicts have impacted on the research. In the present case a similar mechanism seems to have created an inverse effect. In Schultz-Ross & Gutheil's examples the researchers, because of their own inhibitions and outlooks regarding death and life after death, were either hesitant to enter the field or limited their research to simplistic generalizations. In this research, however, the researcher's religious and ideological status was a key factor in the very inception and development of the study.

During the interviews the researcher's Religious Zionist background was doubtless useful in understanding the subtle nuances and 'codes' of behaviour. Even on the

level of language and diction where slang or idiosyncratic terminology needs to be clearly understood, the researcher's first hand knowledge proved helpful. An example can be clearly seen in interviews 6 and 16 where the participants are relating their views on 'giving up' certain areas of Israel:

"Even if the Rabbis were to say outright that we aren't permitted to dismantle them, I still think that it wouldn't change my opinion." (interview 6)

"I think that my answer is affected by the fact that I live in Tapuach. Clearly for me giving up land is unquestionable." (interview 16)

(Tapuach, a small settlement in Samaria, close to the Arab town of Nablus, would be dismantled if *Yehudah VeShomron* were ever given to the Palestinian Authority).

It was vital for the researcher to understand the significance of these statements without having to ask delving questions. The awareness of the religious and social implications of these views allowed the interview to flow, and the knowledge that the interviewer understood 'what he was talking about' freed the participant to relate his standpoints and feelings.

A further example is from a section in interview 13 when the participant is explaining his religious commitment:

"What does it mean in my everyday life?In our community there is a kind of feeling that regarding religion you have to make one decision in your life and that is whether or not to be religious. I think that there is another important decision which most people ignore and that is how they want to relate to the Oral as opposed to the Written Law. So with regard to my everyday life I think it is affected perhaps less than other religious people. I don't pray three times a day; I don't lay *Tephillin* every day." (interview 13)

The researcher understood that the interviewee was representing an atypical standpoint. The blunt differentiation between the Oral and Written Law (as explained in chapter four) is both unusual and non-conformist within the Religious Zionist community. The interviewee identifies himself as religious and yet ideologically he filters out basic tenets of Orthodox behaviour such as regular prayer or the wearing of *Tephillin* (phylacteries). It was critical for the interviewer to quickly grasp this non-standard outlook and the need for further clarification. As was pointed out in chapter four, this particular interviewee shed light on a sector of the Religious Zionist community which, without his input, might not have been adequately discerned in the research. The researcher's awareness that he held relatively unusual views was essential in gaining the utmost from the interview.

Notwithstanding, these advantages were balanced by the price of a certain lack of objectivity. The benefits of cultural matching between the interviewer and the interviewee which seems to have become normative in this type of research (presumably because of advantages such as those listed above) is counterweighted by the disadvantages of interviewer bias - a common phenomenon whereby an interviewer can consciously or unconsciously influence a participant to respond in a certain way. Although recognized techniques were used in an attempt to reduce this effect, the problem is not entirely controllable:

"Techniques for reducing potential bias include good interviewer training in methods for establishing rapport with people, putting them at ease and appearing non-judgemental. Interviewers can also be matched according to their basic socio-demographic characteristics."

(Bowling, 2002, p.261)

It seems that even after following these 'accepted techniques' to reduce the interviewer bias, the best defence is an awareness of the disadvantages – bringing the complications from the realms of the unconscious to the conscious thus affords the

best chance that the interviewer bias will not weaken the validity of the interview. The problems of interviewer bias were highlighted in the present research by an example raised in chapter four (analysis of interview 16) where the researcher presumed that the majority of the interviewees could identify with at least a certain degree of suicide acceptance and when faced with an interviewee who totally denied such an option he tended to delve further than was reasonably acceptable in order to reveal a set of circumstances which would show a degree of suicide acceptance.

A related problem is social desirability bias where the interviewee wants to be seen in the best light or to give answers which he feels are expected of him or which he feels the interviewer wants to hear. Here too the only realistic response is to establish a warm non-judgemental rapport with the interviewee, putting him at ease and creating an atmosphere in which any response will be deemed acceptable.

In the present research, an additional potential interviewer bias blind spot was gender. Of the 18 participants, 8 (45%) were female. Although it can be argued that with training and experience, interviewer characteristics such as gender (and also race, age and other factors) can be neutralized, ideally it might have been useful to have a female professional interviewer for the women participants (for a wider discussion see Pol & Ponzurick, 1989 and Catania et al., 1996). Significantly Pol & Ponzurick conclude their study with the following words of encouragement:

“Finally it should be noted again that gender bias was not found in any of the demographic studies. This finding will be of some comfort to the researcher whose life is filled with constant threats to the quality of data that are collected.” (p.12)

Although it was indeed appealing to include a female interviewer for the female participants, the limitations of the research proved problematic. It was felt that clinical skills and cultural matching were critical factors for the interviewer and no

female with these particular qualities, who was able to give up many, many hours of her time on a totally voluntary basis, was located.

Finally, at the conclusion of the research the writer returns to his clinic. There is no doubt that the numerous interviews, the lengthy questionnaires, the extensive statistical analysis and the carefully thought-out conclusions eventually find their place when the researcher is seated opposite a client.

On a clinical level the research highlights four very specific areas.

- Firstly the study has effectively regulated complacency: Religious people find it difficult to cope in harsh life situations and their religiosity is in no way an **automatic buffer** or safety-net. For religiosity to become a coping tool it must first be engaged and this engagement must become part of the therapy's agenda – **it cannot be taken for granted.**

Several researchers have noted the underemployment of religious content in the therapeutic process when treating religious patients, particularly when they are dealing with harsh life situations (see Dublin, (1963); Peterson and Roy, (1985); Ellis & Smith, (1991) and Neeleman & Lewis, (1994)). More recently Hathaway (2003) has framed the lacking in terms of 'clinically significant impairment' arguing that in particular when treating religious clients, it is imperative for therapists to see religiosity as an 'important area of functioning' "whose impairment may indicate a psychopathological level of severity". Hathaway concludes that the effect of mental illness on the religious experience of clients makes it a critical factor in the setting of intervention goals. Coining A.P.A. vernacular, Hathaway suggests that clinicians must address the issue of C.S.R.I. or 'clinically significant religious impairment' - a fall in a patient's ability to carry out religious behaviour due to a psychological disorder. The present research has not only strengthened these researchers'

arguments but shown that in the case of Religious Zionists in Israel, **at those critical moments**, when the harsh life situation is actually being experienced or immediately afterwards, their belief and faith are **glaringly absent**. If the clinician deems that religious faith might be useful then he must coax it out into the open.

- A further conclusion from the research which finds its place in the psychologist's clinic is that within the wide-ranging religiosity variable, the dominant theme is the participant's **relationship with G-d**. In the light of the present research, the ability to personify belief must, when dealing with certain religious patients, become a therapeutic tool.

- The study emphasised the greater significance of **religious belief** over **religious behaviour** and from a clinical outlook this result gains relevancy when the therapist is faced with the option of emphasising **either** the negative *Halachic* prohibitions **or** the positive will of G-d. Arguably these options are two nuances of the same theme and yet the present research serves to emphasise the preference of an actual and real relationship with G-d as opposed to an emphasis on the *Halachic* aspects of, for example, taking one's own life.

- The study's emphasis on **religious coping** can also be transposed into the therapeutic situation. The research showed that the strength of religiosity as a buffer against suicide or as a coping tool, is in fact a function of religiosity's impact on religious coping. In simple terms, belief is not enough: to be effective it must be translated into mechanisms of religious coping. The present research affirmed redefining the stressor as benevolent and beneficial; seeking control by pleading to G-d to intervene; seeking comfort from religious leaders and coping through supporting and others as the particularly effective coping styles. These coping strategies can not only be worked through as part of the therapy process but even raised as possible options for conduct or assignments outside of the therapy sessions.

W. - A Case History

The following is a brief summary of a short course of therapy which the researcher conducted during the period when he was writing up the research. The example clearly shows the impact of the research and its conclusions on the development of the therapy.

W. arrived at the hospital outpatient clinic asking for help because his 18 year-old daughter had been diagnosed with cancer. He felt that he was unable to cope and that he was not managing to support his daughter through this crisis. After 3 sessions of screening and intake W. was offered a treatment plan of six 50 minute sessions. The nature of the case together with the very limited time frame led to a cognitive approach with an emphasis on coping and behaviour.

W., 45 years old, married with five children, identified himself as a member of the Religious Zionist community. He lives with his family in a suburb populated almost entirely by people of a similar religious persuasion. Since the time allowance was short the therapist was in some instances proactive about areas of discussions and relatively early on W. was encouraged to discuss how G-d fitted into the picture of his daughter's illness. Strangely - or perhaps not so strangely in the light of the present research - W., despite being a deeply religious person, had not considered his faith and belief as bearing any relevance on his predicament:

"I carry on praying three times a day and making blessings and saying grace after meals. I even say *Tehillim* (chapters from the book of Psalms which are often recited at times of stress or suffering) but it's all automatic, all I can think about is T. (his daughter) and what is going to happen."

The therapist suggested that W. set up a 15 minute daily learning session with his local Rabbi, a regular event which also led to discussions about faith and Divine will. Towards the end of the sessions W. asked what the therapist thought about W.

discussing these matters with his daughter (a deeply religious and committed young lady). The therapist encouraged this direction which also served to strengthen W.'s relationship with his daughter. Towards the end of the six sessions the therapist tentatively raised the issue of how W. saw G-d's hand in what was happening. At first W. was bewildered by the question but after a while he tremblingly said that he felt that his family was united and together and that somehow they would get through it.

The six sessions allowed W. 'to make room' for his belief in G-d which in turn enabled him to access religious coping strategies which had otherwise been unavailable to him. In particular he renewed his relationship with G-d and with a religious leader who could provide support and comfort, and who even partially redefined the stressor as benevolent and potentially beneficial. In terms of authentic happiness (Seligman, 2003) W. was able to strengthen his positive traits of religious belief and family responsibility allowing these qualities to find expression, even in the midst of his anguish and anxiety.

The researcher's experience of 'daring' to include religious content into the therapy sessions emphasising issues of belief and faith (with religious patients) has served to strengthen his conviction of the benefit of such an outlook. This conviction is further bolstered by research such as that carried out by Holden, Watts & Brookshire (1991). Their study checked how 95 clinicians responded to an imaginary patient who was convinced that her depression was proof that G-d wanted her to suffer and that if she could succeed in committing suicide it was a sign that G-d did not want her to live. Arguably the most significant result of the study was a response rate of only 35% pointing to the reticence of clinicians to even anonymously address the issue of religion and therapy. Those clinicians who did agree to participate in the study emphasised a basic lack of confidence in the clinicians' ability to address religious

issues and to exploit them as therapeutic tools. Such research serves to reinforce the need to focus on this issue and to actively address the clinicians' caution and wariness to incorporate religious content into therapy.

Research Limitations

When attempting to characterize a community of tens of thousands of people who are spread over a wide geographical, political and social spectrum, any comments must incorporate a certain degree of modesty. The size of the quantitative sample (n=124) fulfilled the accepted statistical requirements (as verified in chapter 5, according to Cohen, 1992) but a larger group of participants would no doubt have provided even more information and perhaps a higher degree of confidence in the results. Similarly in the qualitative section of the research, although an attempt was made to reach as wide a range as possible, the 18 interviewees were clearly not representative of **the whole** community, or even the 18-24 age bracket. There is no doubt that there are sections of the Religious Zionist community in Israel which were **not** represented in either the qualitative or the quantitative elements of the research. Some of the limitations were 'in-built' into the research by factors such as the age limitation and it is plausible that, for example, the 50-70 age bracket would offer different results from those arrived at in the present research. Indeed, the research format created limitations on the validity of the study that a different design - a longitudinal study for example - would have avoided. On the other hand from the outset the research was specifically interested in this age-group and the particular characteristics which are inherent in young adults in the areas of suicide and coping. Other groups within the Religious Zionist community were not part of the research because no viable means was found to reach such youngsters in any reasonable numbers. An important

example is the group which has been referred to in the present research as *Noar HaGvaot* – those youngsters who have **opted out** of the traditional or standard educational frameworks and who are living in farms or outposts in the *Yehudah VeShomron* areas of Israel. This group was clearly not adequately represented in the present study. The four educational institutions used in the research were, as reported in chapter five, chosen for their wide range of students and yet there is no doubt that the *Noar HaGvaot* are not to be found in these four *Yeshivot* or *Midrashot*. This is particularly important because it is distinctly possible or even likely that these youngsters have different outlooks on coping and that they employ different coping or religious coping mechanisms when faced with harsh life situations.

A further unrepresented group is those youngsters who opted out of post-school religious education often going directly from school to the army or national service and thence either to higher secular education or straight into employment. Here too it is possible that the academic weighting which the study achieved by using participants who are all involved at some level in post-school **voluntary** religious education had an effect on the results. In short, despite a desire to show a representative picture of the 18-24 age bracket of the Religious Zionist community, it is clear that the samples were in no way all-encompassing and that certain significant groups were left unrepresented.

Another limitation is related to the research methodology itself. The study attempted to understand how people respond to **harsh life situations** whilst the participants were sitting in comfortable air-conditioned rooms, distanced from the situations which they were describing. The harsh life situations were at best imagined or recalled and often talked about as theoretical possibilities. Scientific honesty demands an awareness that when **actually faced** with such a **real-life** situation the participant might act very differently. This limitation is particularly true of the

quantitative section of the study but is also relevant regarding the semi-structured interviews. However skilful the interviewer, he is at best basing his understanding on the memory and/or imagination of the participant. On the one hand this paradox casts a certain shadow on the validity of the study and on the other hand a more aggressive or invasive methodological design would raise insurmountable ethical obstacles. It is important to emphasise that these comments are not coming to propose a research plan which would involve investigating participants **whilst they are experiencing** the harsh life situations (as has been suggested, such a design would raise its own complications and limitations particularly regarding ethical considerations) and yet it would be unwise and indeed naive to presume that there is no distinction between how one actually responds to harsh life situations and how one reports or imagines that response. The specific dispute is broadly reviewed by Wethington et al. (1995) who suggest that no definitive solution is available and that one must presume that in a seriously-conducted interview the participant's report is a fair assessment of his actual response.

The dilemma is not limited to the present research and is related to a more comprehensive and ongoing debate regarding the validity and reliability of qualitative research (see for example Guba & Lincoln (1989); Bloor (1997); Silverman (1989) and Murphy et al. (1998)).

The decision not to include a control/comparison group in the research design should also be noted. There were three reasons for this decision. Firstly, when using qualitative techniques, it is acceptable practice to base the assessment on just one group (for a discussion of this issue see Elliott et al., 1999; Shumway et al., 2004, and Lounsbury et al., 1980). Secondly, specifically in the area of cultural religious research it is normal to collect data from one socio/religious group (Koenig et al., 2001). Thirdly it was felt that the limitations of a doctoral research project supported

an anyway normal social-scientific practice of examining one cultural-religious group. A control or comparison group may have increased the generalisability of the project and as such might have been preferable; however the limitations referred to above were critical in dictating the scope and breadth of the study. Finally the lack of a control group meant that the research findings can in no way be seen as unique to the Religious Zionist community. Indeed, it is entirely possible that other socio-cultural groups (either within the Religious Zionist community - for example a different age-group - or entirely different socio-religious groups such as the *Charedi*, or secular communities in Israel) would show similar findings. Previous research into other communities and religious groups was referred to in detail in chapters one and two and specific comparable examples are brought in the following section.

Different cultures – Similar research

Although the research limitations did not allow for a control/comparison group it is nonetheless worthwhile to see how the findings of the present study compare with the results of similar research involving different cultural groups.

It has been shown in previous chapters, that no single piece of published research has mirrored the setting and aims of the present research in a contrasting cultural milieu. More precisely, this **was** the case until August 2006 when Molock et al. published a paper entitled ‘The Relationship Between Religious Coping and Suicidal Behaviours Among African American Adolescents’. The similarity was not just in the title. The study looked at how religious coping protected students from suicidality and looked at ‘religious participation’ as a measure of what the present study refers to as religiosity. In addition it discussed how these factors affected hopelessness as a key factor in suicidality. Both studies found that religious coping **style** was significantly

related to suicidal behaviour. A further similarity was the significance of gender differences in religiosity and religious coping styles. Also, in tandem with the present research the article called for close attention to be paid to culturally salient variables such as religious participation and religious coping styles when developing intervention programs for suicide. Interestingly there were several areas which are dominant in the present study which were **not** evident in Molock's work. For example, the significance of the mediating model and the issue of the two stages of coping where religiosity was only relevant in the second stage.

Although no other single piece of research has so closely mirrored the present study, several other studies have researched specific cultural groups in reference to areas which have been touched upon in this research. Dalton (2004) for example, investigated the role of belief and cultural influences on the use of coping strategies by cancer patients in Thailand. She specifically examined the issue of cancer pain in the light of several factors including coping strategies and spiritual beliefs. As in the present study, Dalton's results showed the significant role of religious beliefs in coping with pain but suggested that the specific cultural features of the Thai people were playing a significant but not fully understood role and she concluded that the cultural elements of the study demanded further research. Although the two studies are not really comparable there is clear common ground in the understanding of the significant role of cultural factors in coping and specifically in how the factors integrate with religious coping.

A further example is Ruwanpura et al.'s (2006) study of Tibetan refugees. The research examined the cultural and spiritual constructions of mental distress among Tibetan exiles showing that these constructions were intimately linked to cultural, religious and political factors. The emphasis on these three issues was consistent with the present research and in both studies, religious support was seen to be a key

coping strategy. Indeed, Ruwanpura showed that those refugees who were lacking in a detailed knowledge and understanding of Tibetan Buddhism were at a disadvantage regarding their coping skills.

A further similarity with the present research was Ruwanpura et al.'s call for a keen awareness of cultural factors when attempting to help the Tibetan refugees and what they referred to as a critical need for 'culturally sensitive psychosocial support' is akin to one of the central conclusions of the present research - that clinical intervention with religious people must incorporate their religious and cultural beliefs.

Finally, Al-Krenawi (2005) presented a review of the current situation of mental health practice in Arab countries. Although the paper was a general analysis, the author noted two areas which bear a similarity to the present research. Firstly he emphasised cultural reliance on a deity and on religious leaders as a means of coping with mental health issues as a prevalent theme in the Arab world – a conclusion which is clearly similar to the centrality of religious coping in the Religious Zionist community in Israel. Secondly, akin to almost all the research on coping in culturally defined religious groups (including the present research), the author calls for an improved awareness of what he refers to as 'cultural competence' and the suitability of mental health treatment and services for the non-Western communities of Arab/Muslim countries. Once again the clear implication is that mental health intervention must incorporate the religious and cultural background of the client. The constant repetition of this conclusion seems on the one hand to emphasise how fundamental it is, and on the other hand to highlight its acute **lack** of implementation.

Future Research

Future research in this field should follow two approaches. Firstly there is a clear need to compare the results with other socio-religious groups. Due to previously-mentioned research limitations the present study was unable to assess if the results are limited to the Religious Zionist community in Israel or perhaps relevant to other designated religious groups. It would be particularly interesting to compare the present results with those gained from other defined religious groups within Israel and possibly with other groups from different areas around the world.

One specific area of interest is the Bahai religious community. Chapter four of the present thesis cited research by Ebaugh et al. (1984) which investigated how participants from different religious groups responded to crisis situations. The research was shown to be particularly relevant to the present study in that all of Ebaugh's participants were religious. The study compared the responses of Christian Scientists, Catholic Charismatics and Bahais and the results suggested that only the Bahais turned to their sacred texts and religious beliefs as part of their **immediate** coping strategy. The other two groups appeared to be less inclined to access their religious coping resources, at least during the period surrounding the crisis itself. The present research seems to suggest that the Religious Zionist community in Israel, in similarity to the Christian Scientists and Catholic Charismatics in Ebaugh et al.'s research, is unable to access religious coping mechanisms in the first stage of coping. It would clearly be worthwhile to understand further the reasons surrounding the Bahais' ability to galvanize religious coping mechanisms at times of crisis.

A second potential area for further research is to delve more deeply into the triangular relationship between religious coping, religiosity and suicide. Whereas the present research showed the 3-way correlatory relationship and mediating role of

religious coping, there is much room to enhance the understanding of the association and particularly to learn more about the inverse relationship between suicide ideation and acceptance and religious coping as well as the critical role of religious faith (as opposed to religious behaviour) in the development of effective religious coping skills. Although Weaver et al. (2003) suggest that in the last 5 years there has been an increase in the number of published articles relating religion and spirituality to traumatic events, the dearth of serious research is still clearly apparent particularly in studies which relate these issues specifically to the area of suicide.

Future research needs to enhance the understanding of the role of religious coping skills as a clinical tool in therapy. As has been noted, this area appears to be gravely underdeveloped especially in the treatment of religious patients and further research could highlight the therapeutic potential of these skills.

As stated in the previous chapter, the study revealed the critical role of **religious coping** (as designated by Pargament, Koenig & Perez, (2000)) **as a mediating factor between religiosity and suicide**. The research showed that even when the relationship between religiosity and suicide was tentative (for example with religious behaviour) **when religious coping was introduced**, the relationship became significant, such that certain styles of religious coping, particularly those which emphasise a personalization of the relationship with G-d, are significantly associated with lower levels of suicide ideation and suicide acceptance.

The centrality of religious coping gives rise to a key question regarding the area of *hopelessness* since to date, empirically hopelessness appears to be the only reliable predictor of suicidality (see Beck et al. (1985), Minkoff et al. (1973), Beck et al. (1975) and Stewart et al. (2005)). The present study raises the question of the

possible relationship between religious coping, hopelessness and suicide. Although such a question could well be the basis of an entirely new study, a possible direction is the recent work of Martin Seligman (2003) who has developed the field of what was once termed *hedonics* and which is now popularly referred to as *Authentic Happiness* after his book of the same name. Seligman suggests that the answer to hopelessness is to be found in positive psychology. By concentrating on strengths rather than weaknesses, happiness can be engendered through the development and strengthening of personality traits which each individual possesses and which only need identifying and reinforcing:

“By frequently calling upon their signature strengths in all the crucial realms of life, readers will not only develop natural buffers against misfortune and the experience of negative emotion, they will move their lives up to a new, more positive plane.”

(Seligman, 2003, Introduction)

Seligman emphatically points out that religion is in itself a form of positive psychology. In tandem with research highlighted in the present study he relates how religious people lead genuinely happier and more balanced and fulfilled lives:

“Religious Americans are clearly less likely to abuse drugs, commit crimes, divorce and kill themselves. They are also physically healthier and they live longer. Religious mothers of children with disabilities fight depression better, and religious people are less thrown by divorce unemployment, illness and death.”

(Seligman, 2003, p.59)

Seligman explains this causal relationship by suggesting that religion imbues people with a sense of optimism giving life a sense of worth:

“...religion instils hope for the future and creates meaning in life.” (p.60)

Indeed for Seligman, hope, and its presence or absence is a critical factor in the attainment of real happiness. He cites an undergraduate research thesis by Sheena Sethi Iyengar which showed that:

“...the increase in optimism which increasing religiousness brings, is entirely accounted for by greater hope.” (p.60)

It seems that religion does for religious people what cognitive positive psychology or *authentic happiness* does for secular people - it strengthens our ability for gratitude and forgiveness:

“Insufficient appreciation and savouring of the good events in your past and overemphasis of the bad ones are the two culprits that undermine serenity, contentment and satisfaction. There are two ways of bringing these feelings about the past well into the region of contentment and satisfaction. Gratitude amplifies the savouring and appreciation of the good events gone by, and rewriting history by forgiveness loosens the power of the bad events to embitter.” (p.70)

Seligman and the other ‘positive psychologists’ are relevant to the present research for two reasons. Firstly the parallel between the effects of their new direction in psychology and the effects of religion for religious people is striking. In a logic format, if positive psychology leads to a reduction in hopelessness, and a reduction in hopelessness leads to a reduction in suicidality, then one can assume that positive psychology may lead to a reduction in suicidality. Similarly, if as the present research suggests, religious coping leads to a reduction in suicide then it is clearly possible that the religious coping is in fact leading to a reduction in hopelessness:

1.

IF Positive Psychology \rightarrow \downarrow Hopelessness

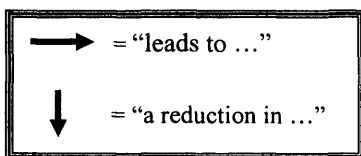
AND \downarrow Hopelessness \rightarrow \downarrow Suicidality

THEN Positive Psychology \rightarrow \downarrow Suicidality

2.

IF Religious Coping \rightarrow \downarrow Suicidality

THEN Religious Coping \rightarrow \downarrow Hopelessness



Such a possibility is clearly a topic for further research.

The second area of importance is on a wider plane. It is possible that for those people who are **not** of a religious persuasion and who **do not** see faith and belief as central aspects of their lives, Seligman's outlook of *authentic happiness* could offer a buffer against suicidality in a way which is similar to the buffer which religiosity and more specifically, religious coping, offers religious people. The comparison between the two functions could aid the understanding of them both.

Authentic happiness is rooted in the principles of cognitive psychology and a further related direction for associating religion with coping has been suggested by James & Wells (2004) and others who promote the concept that the relationship between religious behaviour and mental health should be seen as a cognitive construct:

“A number of cognitive-behavioural mechanisms might underlie the robust association between dimensions of religiosity and mental health.”

(James & Wells, 2004 p.366)

They go on to suggest that since religious beliefs can serve as a foundation for assessing life events or alternatively as a basis for the ‘self regulation’ of thinking processes, they could be critical tools for coping with harsh life situations. A religious belief system could, for example, be beneficial by allowing someone who is going through a life-crisis to find a meaning in events which would otherwise be difficult to explain:

“The content of the generic beliefs held would influence the content of situational stress appraisals and so affect an individual’s response.”

(p.366)

Some research has already addressed this issue in particular a study by Propst (1992) which showed that for religious patients a ‘cognitive-behavioural religious-imagery treatment’ was of more positive effect than a ‘cognitive-behavioural non-religious-imagery treatment’. Such a cognitive outlook might well be relevant in a clinical setting within the Religious Zionist community in Israel and in general with other socio-religious groups and therefore here too further research is pertinent to verify the potential of this direction.

It should be noted however that there is a need not only for further research but also advances in training of clinicians so that as James & Wells (2004) comment:

“Changes in training are required to ensure that progress within the academic field is matched by further consideration of religious factors in the clinical domain.”

(p.373)

In chapter one Pargament & Brant (1998) were referred to in their call for future research which would involve a 'micro-analytical research approach' paying greater attention to the style and manner of religiosity, the sample, the situation, and the time-frame. In their analysis of religion and coping they cautiously criticized much of the previous research calling for higher standards and a more scientific outlook. Overall the present study has succeeded in addressing Pargament & Brant's criticisms allowing for more specific and defined results. In addition, Pargament & Brant noted the absence of **longitudinal studies** which, so they claimed, are also critical for any serious assessment of the effect of religious coping on mental health. This design enhancement was not accomplished in this study and in looking to the future there is clearly a need for such longitudinal studies so that the paradigms set out in the present research can be verified over time allowing for much stronger levels of validity and greater confidence in the accuracy of the results.

Finally, in the previous chapter the researcher referred to the centrality of suicide prevention in all research relating to suicide. The present study has identified two areas which are significant in the area of prevention: firstly the importance of religious coping and secondly the educational challenge of making religious coping available to religious people in the **first stage** of coping.

Empirically the study showed that because of its mediating effect, it is **more relevant to look at religious coping than at religiosity itself** and yet at this point the study veers away from pure analytical research. Future work in this area cannot only be focused simply on research but must also involve an attempt at **changing socially accepted norms**. Since educationally it is more realistic to impact religiosity than religious coping, the educational challenge must lie here and not with religious coping as perhaps the present research would dictate. In other words although

religious coping is the central mediating factor and therefore more significant to suicide than religiosity itself, religious development and religiosity are areas which educationalists can conceivably contend with and therefore the change must begin there.

Glossary of Hebrew Terms

Aninut – Initial phase of mourning which extends from the death (of a close relative) until after the burial. The period of *Aninut* is at most a matter of days and often only several hours. During the period of *Aninut* in which essentially the mourner is exempt from keeping the positive commandments.

Avelut - The second stage of mourning which extends from after the funeral and lasts with regard to certain aspects, for a whole year. whereas the period of *Avelut* lasts,;

Ba'al Teshuva (pl. *Ba'alei Teshuva*) – Jewish people who have grown up in a secular environment and have chosen to become Orthodox.

Bitul Torah - Time which is wasted and which could be spent studying Holy works.

Bnei Akiva – Religious youth movement associated with the Religious Zionist community.

Chanukah – Jewish festival of lights which commemorates the victory of the Jewish people over the Syrian Greeks in the second century.

Chardal - A synthesis of the terms *Charedi* (ultra-orthodox) and *Leumi* (nationalistic). Traditionally the *Charedi* (ultra-orthodox) community does not associate with Zionist nationalistic aspirations and the term *Chardal* indicates an ultra-orthodox outlook to the keeping of the *Mitzvot* together with a fervently nationalistic perspective on the State of Israel.

Charedi (pl. *Charedim*), *Chasid* - Ultra-orthodox.

Chazara B'she'ela (pl. *Chozrim B'she'ela*) - The process whereby religious, Orthodox Jews relinquish their religious convictions and choose to no longer observe an Orthodox way of life.

Cheder (pl. *Chadarim*) – Ultra-orthodox primary school in which almost all of the lessons are based around religious studies.

Chilul Hashem - A defamation of G-d's name.

Chizuk – A strengthening or reinforcement of religious ideals.

Dati (pl. Dati'im) – Orthodox, religious.

Emuna - Spiritual faith.

Eretz Yisrael Hashlema – Literally ‘the complete land of Israel’. Reference to the borders of the state of Israel which include the lands conquered during the Six Day war (Judea and Samaria, East Jerusalem etc.).

Gush Emunim - Literally the Block of the Faithful. The settler movement which evolved from within the Religious Zionist camp after the Six Day War in 1967. The movement ideologically strove to incorporate the lands occupied in the war into the permanent borders of Israel.

Gush Katif, The Gush – The area of southern Israel which was the centre-piece of Prime Minister Sharon’s Disengagement plan in the summer of 2005.

Halacha, Halachic – Jewish law.

Hashem – Name of G-d (respectful).

Hesder, Yeshivat Hesder - The Hebrew word for ‘arrangement’, a programme which combines advanced Talmudic studies with (a shortened) military service. A common choice for young Religious Zionists who are motivated towards religious studies but who concurrently feel morally and religiously bound to help defend their people and their country.

Intifada – Arab uprising in Judea and Samaria and Gaza. There have been two distinct periods of intifada, from 1988-1999, and from 2000 until the present day.

Kaddish – The mourner’s prayer recited regularly for eleven months after the death of a close relative and then annually on the anniversary of the passing.

Kashrut – Jewish dietary laws and prohibitions.

Kippa sruga – Knitted or crocheted coloured male skull cap or head-covering indicating an association with the Religious Zionist community.

Leumi - nationalistic.

Mechina Kdam Tzva 'it, Mechina (pl. Mechinot) – Literally pre-military academy. Institution which offers potential conscripts the opportunity to spend a year in full time religious studies in a *Yeshiva*-like institution - after completing their high school and before conscription.

Midrasha (pl. Midrashot) – Institute for higher religious education for women.

Minyan - Ten Jewish males over the age of thirteen needed for public prayer rituals.

Mitzvah (pl. Mitzvot) – Commandments or religious obligations.

Ne'emanut - Faithfulness.

Nekuda – Nationalistic monthly journal published by the Settlers' Association.

Noar Hagva 'ot - Literally the youth of the hills, they are country-wide loosely-defined group who are identified by their outward appearance of big knitted skull-caps, long hair and a slightly dishevelled look. Generally they have dropped out of the main-stream educational framework and live and work in small farms or outposts mostly in Judea and Samaria they are thought of as being ultra-nationalistic in their ideology.

Non-kosher – Food which is prohibited due to Jewish religious dietary requirements.

Passover – Jewish spring festival of freedom which commemorates the Jewish people coming out of slavery in Egypt on their way to the Promised Land.

Pikuach Nefesh - The paramount Jewish principle of saving human life.

Piskei Halacha - Religious decision instructed by a Rabbinic authority regarding questions of a religious nature.

Rachmonus (Yiddish) - Mercy.

Rosh Midrasha – Head of an institute for higher religious education for girls.

Rosh Yeshiva (pl. Roshei Yeshivot) – Head of a *Yeshiva*.

Sabra - Native Israelis have been compared to the sabra cactus fruit which is prickly and harsh on the outside but sweet tasting and pleasant on the inside.

Shabbat – The Sabbath day.

Shacharit – The morning prayer service.

Shema – Central liturgical prayer which reaffirms belief in G-d.

Shomron – Area in the north of Israel which was occupied as a result of the Six Day War part of which was included in the Disengagement plan of August 2005.

Shulchan Aruch - Code of Jewish law.

Talmud Torah - Orthodox primary school in which almost all of the lessons are based around religious studies.

Tephillin – Phylacteries, small black boxes containing passages from the Bible which are worn every weekday morning the prayer service.

Toenet (pl. Toanot) – Female barrister in a religious Rabbinical Court.

Yehuda VeShomron - Land mass between Israel's pre-war borders and the river Jordan which was occupied as a result of the Six Day War in 1967. Also known as the West Bank (of the river Jordan). Includes key historical sites such as Hebron and Shechem (Nablus) as well as East Jerusalem, the Temple Mount and the Western Wall.

Yeshiva – Talmudic academy of higher religious studies.

Yeshivat Merkaz HaRav - Talmudic Academy founded by Rabbi Abraham HaCohen Kook (1865-1935) – the first Chief Rabbi of Palestine and perhaps the most prominent rabbinic figure in Religious Zionist history.

Yom Kippur – Fast day known as the Day of Atonement. The holiest day of the Jewish year.

References

- Adams, N. (1995). Spirituality, science and therapy. *Australian and New Zealand Journal of Family Therapy*, 16(4), 201-208.
- Al-Krenawi, A. (2005). Mental health practice in Arab countries. *Current Opinion in Psychiatry*, 18(5), 560-564.
- Allport, G.W. (1950). *The Individual and his Religion*. New York: Macmillan.
- Allport, G.W. (1959). Religion and prejudice. *Crane Review* 2, 1-10.
- Allport, G.W., & Ross, J.M. (1967). Personal religious orientation and prejudice. *Journal of Personality and Social Psychology*, 5, 432-443.
- Amital, Y. (2000). Not everything is an experience! *Meimad*, 19, 21-23. (Hebrew)
- Amital, Y. (2000) Lecture delivered by Rabbi Amital and published in the Yeshiva Har Etzion news-letter no.737. (Hebrew).
- Aran, G. (1987). From Religious Zionism to a Zionist religion: The roots of Gush Emunim and its culture. *Doctorate thesis*. Hebrew University, Jerusalem. (Hebrew)
- Argyle, M. (2000). *Psychology and Religion: An introduction*. London: Routledge.
- Argyle, M., & Beit-Hallahmi, B. (1975). *The Social Psychology of Religion*. London: Routledge & Kegan Paul.
- Augustine, (2000). *The city of G-d* (translated version). New York, NY: The Modern Library.
- Avruch, K. (1988). Gush Emunim: The "Iceberg Model" of extremism reconsidered. *Middle East Review*, 21, 27-33.

- Baker, M., & Gorsuch, R. (1982). Trait anxiety and intrinsic-extrinsic religiousness. *Journal for the Scientific Study of Religion*, 21, 119-122.
- Bar-Lev, M. (1977). Alumni of Yeshiva High Schools in Israel: between tradition and renewal. *Doctorate thesis*. Bar-Ilan University, Tel Aviv. (Hebrew)
- Bar-Lev, M. (1995). Coming into the light. *Meimad*, 3, 27-31. (Hebrew)
- Bar-Joseph, H. & Tzuriel, D. (1990). Suicidal tendencies and ego identity in adolescence. *Adolescence*, 25, Spring, 216-223.
- Batson, C.D., & Ventis, W.L. (1982). *The Religious Experience*. New York: Oxford University Press.
- Battista, J. & Almond, R. (1973). The development of meaning in life. *Psychiatry*, 36, 409-427.
- Bat Yehuda, G. (1989). The dream of statehood for the early Religious Zionists. *Shargai* 3, 19-26. (Hebrew)
- Beck, A.T., Kovacs, M. & Weissman, A. (1975). Hopelessness and suicidal behavior. An overview. *Journal of the American Medical Association*, 234, 11, 1146-1149.
- Beck, A.T., Steer, R.A., Kovacs, M. & Garrison B. (1985). Hopelessness and eventual suicide: a 10-year prospective study of patients hospitalized with suicidal ideation. *American Journal of Psychiatry*, 142, 559-563.
- Beit-Hallahmi, B. (1975). Religion and suicide behaviour. *Psychological Reports*, 37, 1303-1306.
- Beit-Hallahmi, B. (1989). *Prolegomena to the psychological study of religion*. Lewisburg, PA: Bucknell University Press.
- Beit Hallahmi, B. (1992). *Despair and Deliverance*. Albany: University of New York Press.
- Beit-Hallahmi, B. & Argyle, M. (1997). *The Psychology of Religious Behaviour, Belief and Experience*. London: Routledge.

- Bem, S.L. (1981). *Bem Sex Role Inventory: professional manual*, Palo Alto, California, Consulting Psychologists Press.
- Benson, P.L. (1990). *The Troubled Journey: A Portrait of 6th-12th Grade Youth*. Minneapolis: Lutheran Brotherhood.
- Benson, P.L., & Donahue, M.J. (1989). Ten year trends in at-risk behaviour: A national study of black adolescents. *Journal of Adolescent Research*, 4(2), 125-139.
- Benson, P.L., Yeager, R.J., Wood, P.K., Guerra, M.J., & Manno, B.V. (1986). *Catholic High Schools: their Impact on Low-Income Students*. Washington, DC: National Catholic Educational Association.
- Bergin, A.E. (1983). Religiosity and mental health: a critical re-evaluation and meta-analysis. *Professional Psychology: Research and Practice* 14, 170-184.
- Berman, A. (1974). Belief in afterlife, religion, religiosity and life-threatening experiences. *Omega*, 5,2, 127-135.
- Bhugra, D. (1996). Religion and mental health. In Bhugra, D. (Ed.), *Psychiatry and religion*. London: Routledge.
- Bloch, E.D. (1996). Religion, Zionism, and Religious Zionism. *Tikkun*, 11, 60-62. (Hebrew)
- Bloor, M. (1997). Techniques of validation in qualitative research: a critical commentary. In G. Miller, R. Dinwall (eds.) *Context and Method in Qualitative Research*. London: Sage, 37-50.
- Breault, K.D. (1986). Suicide in America: a test of Durkheim's theory of religious and family integration, 1933-1980. *American Journal of Sociology*, 96, 628-656.
- Breier, Z. (2002). *Even in the Darkest Moments*. Mori Bank: Jerusalem.
- Breuer, M. (1960). Faith and science in Biblical commentary. *Deot*, 11, 18-24. (Hebrew)

- Bulman, R. J., & Wortman, C.B. (1977). Attributions of blame and coping in the 'real world': Severe accident victims react to their lot. *Journal of Personality and Social Psychology*, 37(5), 351-363.
- Campbell, C. (1971). *Toward a Sociology of Irreligion*. New York: MacMillan.
- Carson, R.C., Butcher, J.N. & Coleman, J.C. (1988). *Abnormal Psychology and Modern Life*. Glenview Illinois: Scott, Foresman and Company.
- Carver, C.S., Schreier, M.F. & Weintraub, J.K. (1989). Assessing coping strategies: a theoretically-based approach. *Journal of Personality and Social Psychology*, 56, 267-283.
- Catania, J., Binson, D. & Canchola, J. (1996). Effects of interviewer gender, interviewer choice and item wording on responses to questions concerning sexual behaviour. *The Public Opinion Quarterly*, Vol.60, 345-375.
- Chalmers, I. & Haynes, B. (1994). Reporting, updating and correcting systematic reviews of the effects of health care. *British Medical Journal*, 309, 862-5.
- Chamberlain, K. (1988). On the structure of subjective well-being. *Social indicators research*, 20, 581-604.
- Chamberlain, K., & Zika, S. (1988). Measuring meaning in life: An examination of three scales. *Personality and Individual Differences*, 9, 589-596.
- Chamberlain, K., & Zika, S. (1992). Religiosity, meaning in life and psychological well being. In J.F. Schumaker (Ed.), *Religion and Mental Health*. New York: Oxford University Press.
- Chang, B., Skinner, K. & Boehmer, U. (2001). Religion and mental health among women veterans with sexual assault experience. *International Journal of Psychiatry in Medicine*, 31(1), 77-95.
- Cinnirella, M. & Loewenthal, K.M. (1999). Religious and ethnic group influences on beliefs about mental illness: a qualitative interview study. *British Journal of Medical Psychology*, 72, 505-524.

- Cochran, J.K., Beeghley, L., & Bock, E.W. (1988). Religiosity and alcohol behaviour: An exploration of reference group theory. *Sociological Forum*, 3(2), 256-276.
- Cohen, J. (1992). A power primer. *Psychological Bulletin*, 112, 155-159.
- Cohn, H.C. (1972). Suicide. In: *Encyclopaedia Judaica*. Vol. 15, Keter: Jerusalem.
- Crawford, M.E., Handal, P.J. & Weiner, R.L. (1989). The relationship between religion and mental health/distress. *Review of Religious Research*, 31, 16-22.
- Dalton, J.A. (2004). *The Thai cancer pain experience: Relationships among spiritual beliefs, pain beliefs, pain appraisal, pain coping, and pain perception and outcomes*. Ph.D. dissertation, The University of North Carolina.
- Danto B.L. & Danto J.M. (1981). Jewish and non-Jewish suicide in Oakland County, Michigan. In Soubrier & Vedrinne (Eds.) *Depression and Suicide*. Paris: Pergamon Press.
- Davis, C.G., Nolen-Hocksema, S. & Larson, J. (1998). Making sense of loss and benefiting from the experience of two construals of meaning. *Journal of Personality and Social Psychology*, 75(2), 561-574.
- Dein, S. (2002). The power of words. Healing narratives amongst Lubavitch Hasidim. *Medical Anthropology Quarterly* 16(1) 41-62.
- Dein, S. (2005). Spirituality, psychiatry and participation: a cultural analysis. *Transcultural Psychiatry*, 42 (4), 526-544.
- Demerath, N.J. (1969). Irreligion, a-religion, and the rise of the religion-less church: Two case studies in organized convergence. *Sociological Analysis*, 30, 191-203.
- Denison, S. (2002). Sacred pool ringed by totem poles in Scotland's ritual glen. *British Archaeology*, 64, 1-2.
- Diekstra, R. F. & Kerkhof, A. J. (1989). Attitudes towards suicide: the development of a suicide questionnaire (SUIATT). In R.F. Diekstra, R. Maris, S. Platt & G. Sonneck (Eds.) *Suicide and its Prevention: the Role of Attitude and Imitation*. Brill: Leiden.

- Domino G. & Miller K. (1992). Religiosity and attitudes to suicide. *Omega*, 25, 271-282.
- Domino, G., Moore, D., Westlake, L. & Gibson, L. (1982). Attitudes toward suicide: a factor analytic approach. *Journal of Clinical Psychology*, 38, 257-262.
- Don-Yehiya, E. (1984). Jewish orthodoxy, Zionism and the State of Israel. *Jerusalem Quarterly* 31, 10-30.
- Don-Yehiya, E. (1987). Jewish messianism, religious Zionism and Israeli politics: The impact and origins of Gush Emunim. *Middle Eastern Studies*, 23, 215-234.
- Donahue, M.J. (1985). Intrinsic and extrinsic religiousness: Review and meta-analysis. *Journal of Personality and Social Psychology*, 48, 400-419.
- Donahue, M.J. (1987). *Religion and drug use: 1976-1985*. Paper presented at the annual meeting of the society for the scientific study of religion, Louisville, Kentucky.
- Dublin, L.I. (1963). *Suicide: a Sociological and Statistical Study*. New York, NY: Ronald Press.
- Durkheim, E. (1897). *Suicide: A study in Sociology*. Translated by J.E. Spaulding (1951). Glencoe Illinois: Free Press.
- Ebaugh, H.R.F., Richman, K. & Chafetz, J.S. (1984). Life crises among the religiously committed: do sectarian differences matter? *Journal for the Scientific Study of Religion*, 23, 19-31.
- Elliot, R. (1995). Therapy process research and clinical practice: Practical strategies. In M. Aveline & D.A. Shapiro (Eds), *Research Foundations for Psychotherapy Practise*, 49-72, Chichester: Wiley.
- Elliot, R., Fischer, C.T. & Rennie, D. (1999). Evolving guidelines for publication of qualitative research studies in psychology and related fields. *British Journal of Clinical psychology*, 38, 215-229.

- Ellis, A. (1980). Psychotherapy and atheistic values: a response to A.E. Bergin's Psychotherapy and religious values. *Journal of Consulting and Clinical Psychology*, 48, 635-639.
- Ellis, A. (1986). *The Case against Religion: a psychotherapist's view*. Austin TX: American Atheist Press.
- Ellis, J.B., & Smith, P.C. (1991). Spiritual well being, social desirability and reasons for living: is there a connection? *International Journal of Social Psychiatry*, 37, 57-63.
- Ellison, C.G. & Taylor, R.J. (1996). Turning to prayer: Social and situational antecedents of religious coping among African Americans. *Review of Religious Research*, 38, 111-131.
- Emmons, R.A. (1998). Religion and personality. In H.G. Koenig (Ed.). *Handbook of Religion and mental health*. New York: Academic Press.
- Erikson, E.H. (1968). *Identity: Youth and Crisis*. New York: Norton.
- Erikson, E. (1959). *Identity and the Life Cycle: Vol. 1. Selected papers, Psychological issues*. New York: International Universities Press.
- Eysenck, H.J. (1994). Meta-analysis and its problems. *British Medical Journal*, 309, 789-792.
- Festinger, L. (1957). *A Theory of Cognitive Dissonance*. Stanford University Press.
- Fireisen, Y. (2000). Your temple is our temple. *Nekuda*, 237, 60-64. (Hebrew)
- Fishman, A. (1995). Modern Orthodox Judaism: a study in ambivalence. *Social-Compass* 42, 89-95.
- Folkman, S., Lazarus, R.L., Dunkel-Schetter, C., DeLongis, A. & Gruen, R. (1986). Dynamics of a stressful encounter: cognitive appraisal, coping and encounter outcomes. *Journal of Personality and Social Psychology*, 50, 5, 992-1003.
- Francis, L.J. (1987). The psychology of gender differences in religion: a review of empirical research, *Religion*, 27, 81-96.

- Frankel, R.D. (2006). Katif youth psychologically damaged. *Jerusalem Post*, March 2nd 2006.
- Frankl, V.E. (1963). *Man's Search for Meaning*. New York: Pocketbooks.
- Freud, S. (1927). *The Future of an Illusion*. London: Hogarth Press.
- Gal, R. (1996). Forty percent of teenagers hate Arabs! *Meimad*, 8, 6-9. (Hebrew)
- Ganzevoort, R.R. (1998). Religious coping reconsidered, Part one: an integrated approach. *Journal of Psychology and Theology*, 26, 270-275.
- Gartner, J., Larson, D.B. & Allen, G.D. (1991). Religious commitment and mental health: a review of the empirical literature. *Journal of Psychology and Theology*, 19, 6-25.
- Gibbs, J.P., & Martin, W.T. (1981). Status integration and suicide. In A. Giddens (Ed.), *The Sociology of Suicide*. London: Frank Cass.
- Glaser, B.G. & Strauss, A.L. (1967). *The Discovery of Grounded Theory: Strategies for Qualitative Research*. New York, NY: Aldine Publishing Company.
- Glock, C.Y. & Stark, R. (1965). *Religion and Society in Tension*. Chicago: Rand McNally.
- Gopin, M. (1998). Carnal Israel: the future of Jewish spirituality in the age of Zionism. *Tikkun*, 13, 62-63. (Hebrew)
- Gorsuch, R.L. & Butler, M.C. (1976). Initial drug abuse: a review of predisposing social psychological factors. *Psychological Bulletin*, 83(1), 120-137.
- Gouldner, A. (1975). *The Coming Crisis of Western Sociology*. New York: Avon.
- Graziano, A.M. & Raulin, M.I. (1989). *Research Methods: A Process of Enquiry*. New York: Harper & Row.
- Greenberg, D. & Witztum, E. (2001). *Sanity and Sanctity: Mental Health Work among the Ultra Orthodox in Jerusalem*. New Haven and London: Yale University Press.

- Gross, M. (1971). Suicide and Religion: A study of white adults in New York City, 1963-67. *Life Threatening Behaviour*, 1, 163-177.
- Guba, E.G. & Lincoln, Y.S. (1989). *Fourth Generation Evaluation*. Newbury Park, Ca: Sage.
- Har'el Y. (1995). Gush Emunim: twenty years on. *Nekuda*, 187, 14-23. (Hebrew)
- Hassan, R. (1983). *A Way of Dying: Suicide in Singapore*. Kuala Lumpur: Oxford University Press.
- Hathaway, W.L. (2003). Clinically significant religious impairment. *Mental Health, Religion and Culture*, 6,2, 113-129.
- Heilman, S.C. & Witztum, E. (2000). All in faith: Religion as the idiom and means of coping with distress. *Mental Health, Religion and Culture*, Vol. 3(2), 115-124.
- Heller, J.E. & Nemoy, L. (1972). Karaites. In *Encyclopaedia Judaica*. Vol. 10. Jerusalem: Keter.
- Hoelter, J.W. (1979). Religiosity, fear of death and suicide acceptability. *Suicide and Life Threatening Behavior*, 9(3), 63-172.
- Holden, J.M., Watts, R.E. & Brookshire, W. (1991). Beliefs of professional counsellors and clergy about depressive religious ideation. *Counselling and values*, 35, 93-103.
- Holmes, C.B. (1985). Comment on "Religiosity and United States suicide rates, 1972-1978". *Journal of Clinical Psychology*, 41(4), 580.
- Houmanfar, R., Hayes L.J. & Fredericks D.W. (2001) .Religion and cultural survival. *The Psychological Record*, 51(1), 19-38.
- Jacobs, L. (1999). *A Concise Companion to the Jewish Religion*. Oxford University Press.
- James, W. (1982). *The Varieties of Religious Experience*. London: Penguin. (Originally published in 1902).

- James, A. & Wells, A. (2004). Religion and mental health: towards a cognitive-behavioural framework. *British Journal of Health Psychology*, 8(3), 359-376.
- Jenkins, R.A. & Pargament, K. I. (1988). Cognitive appraisals in cancer patients. *Social Science and Medicine*, 26(6), 625-633.
- Jensen, J.P. & Bergin, A.E. (1988). Mental health values of professional therapists: A national interdisciplinary survey. *Professional Psychology: Research and Practice*, 19, 290-297.
- Jewish virtual Library, Internet Site.
<http://www.jewishvirtuallibrary.org/source/quote/herzl> Accessed 16/5/06. *Theodor Herzl on the Jewish State*.
- Johnson, D., Fitch, S.D., Alston, J.P. & McIntosh, W.A. (1980). Acceptance of conditional suicide and euthanasia among adult Americans. *Suicide and Life Threatening Behaviour*, 10, 157-166.
- Kamal, Z. & Loewenthal K.M. (2002). Suicide beliefs and behaviour among young Muslims and Hindus in the UK. *Mental Health, Religion & Culture*, 5, 111-118.
- Kedem, P. (1991). Dimensions of Jewish Religiosity. In Z.Sobel & B. Bet-Hallahmi (eds.). *Tradition, Innovation, Conflict: Jewishness and Judaism in contemporary Israel*. Albany, N.Y.: State University of New York Press.
- Kfar Haroeh Website. <http://www.haroe.org.il/haroe/>. Accessed on 3/01/03.
- Kimberly, A. (2001). Emotional health, well-being, and religion as quest. *Dissertation Abstracts International Section A: Humanities and Social Sciences*, Vol. 61(10A).
- Klagsburn, F. (1977). *Youth and Suicide: Too Young to Die*. New York: Gulf and Western Corp..
- Koenig, H.G., Cohen, H.J., Blazer, D.G., Pieper, C., Meador, K.G., Shelp, F., Goli, V. & DiPasquale, B. (1992). Religious coping and depression among elderly hospitalized and medically ill men. *American Journal of Psychiatry*, 149(12), 1693-1700.

Koenig, H.G., McCullough, M.E. & Larson, D.B. (2001). *Handbook of Religion and Health*. New York: Oxford University Press.

Kohn, R., Levav, I., Chang, B., Halperin, B. & Zadka, P. (1997). Epidemiology of youth suicide in Israel. *Journal of the American Academy of Child and Adolescent Psychiatry*, 79, 468-473.

Kook, A.Y. (1978). *Lights of Penitence, Lights of Holiness: the Moral Principles, Essays, Letter and Poems* (translated by Ben Zion Bokser). Paulist Press.

Kook, A. Y. (1985 reprint). *Orot*. Jerusalem: Mossad Harav Kook. (Hebrew)

Ladha, K.S., Bhat, S.M. & D'Souza, D. (1996). Suicide attempts in a general hospital in India: Their socio-demographic and clinical profile: Emphasis on cross-cultural aspects. *Acta Psychiatrica Scandinavica*, 94, 26-30.

Larson, D.B., Koenig, B.H., Kaplan, B., Greenberg, R.S., Logue, E. & Tyroler, H.A. (1989). The impact of religion on men's blood pressure. *Journal of Religion and Health*, 28, 265-278.

Lazar, A., Kravetz, S. & Friedrich-Kedem, P. (2002). The multidimensionality of motivation for Jewish religious behaviour: content, structure, and relationship to religious identity. *Journal for the Scientific Study of Religion*, 41,3, 509-519.

Lazarus, R.S. & Folkman, S. (1984). *Stress Appraisal and Coping*. New York: Springer.

Lea, G. (1982). Religion, mental health, and clinical issues. *Journal of Religion and Health*, 21, 336-351.

Leavey, G. (1999). Suicide and Irish migrants in Britain: identity and integration. *International Review of Psychiatry*, 11, 168-172.

Leibowitz, Y. (1987) Commandments. In A. Cohen, & P. Mendes-Flohr, (eds.), *Contemporary Jewish Religious Thought. Original Essays on Critical Concepts, Movements, and Beliefs*, New York: Scribner.

- Leininger, M.M. (1985). Ethnography and ethnonursing: Models and modes of qualitative data analysis. In M.M. Leininger (Ed.), *Qualitative research methods in nursing*. Orlando, FL: Grune & Stratton.
- Lester, D. & Francis, L.J. (1993). Is religiosity related to suicidal ideation after personality and moods are taken into account? *Personality and Individual Differences*, 15, 5, 591-592.
- Levav I. & Aisenberg E. (1989). Suicide in Israel: cross national comparisons. *Acta Psychiatrica Scandinavica*, 79, 468-473.
- Levav, I., Magnes, J., Aisenberg, E., Rosenblum, I. & Gil, R. (1988). Sociodemographic correlates of suicidal ideation and reported attempts - a brief report on a community survey. *Israel Journal of Psychiatry*, 25, 38-45.
- Levin, J.S. & Chatters, L.M. (1998). Research on religion and mental health: An overview of empirical findings and theoretical issues. In H.G.Koenig, (Ed.). *Handbook of Religion and Mental Health*. New York: Academic Press.
- Liebman, C.S. & Don-Yehiya, E. (1984). *Religion and Politics in Israel*. Bloomington: University of Indiana press.
- Lifton, R.J. (1993). *The Protean Self: Human Resilience in an Age of Fragmentation*. Chicago: University of Chicago Press.
- Lipsedge, M. (1996). Religion and madness in history. In D. Bhugra (Ed.), *Psychiatry and Religion*. London: Routledge Press.
- Lo Presto, C.T., Sherman, M.F. & DiCarlo, M.A. (1995). Factors affecting the uacceptability of suicide and the effects of evaluator depression and religiosity. *Omega*, 30, 3, 205-221.
- Loewenthal, K.M. (1995) *Religion and Mental Health*. London: Chapman & Hall.
- Loewenthal, K.M. (2000). *The Psychology of Religion*. Oxford: Oneworld.

- Loewenthal, K.M. (2001). *An introduction to psychological tests and scales* (2nd ed.). Hove: Psychological Press.
- Loewenthal, K.M. & Cinnirella, M. (2000). Religious issues in ethnic minority mental health with special reference to schizophrenia in Afro-Caribbeans in Britain: a systematic review. In D. Ndegwa & D. Olajide (eds.) *Main Issues in Mental Health and Race*. Ashgate Press.
- Loewenthal, K.M. & MacLeod, A.K. (1996). Religion and cognitive aspects of coping. *International Congress of Psychology, Montreal*.
- Loewenthal, K.M. & MacLeod, A.K., & Cinnirella, M. (2002). Are women more religious than men? Gender differences in religious activity among different religious groups in the UK. *Personality and Individual Differences*, 32, 133-139.
- Lounsbury, J.W.D., Leader, D.S.D., Meares, E.P.D. & Cook, M.P.D. (1980). An analytic review of research in community psychology. *American Journal of Community Psychology*, 8(4), 415-41.
- Maimonides, M. *Commentary on the Mishna, Sanhedrin, 10*.
- Maltby, J., Lewis, C.A. & Day, L. (1999). Religious orientation and psychological well-being: The role of the frequency of personal prayer. *British Journal of Health Psychology*, 4, 363-378.
- Manfredi, C. & Pickett, M. (1987). Perceived stressful situations and coping strategies utilized by the elderly. *Journal of Community Health Nursing*, 4, 99-110.
- Martin, W.T. (1984). Religiosity and United States suicide rates, 1972-1978. *Journal of Clinical Psychology*, 40, 1166-1169.
- Marx, T. (1998). Religious Zionism: from idealism to idolatry. *Tikkun*, 13, 60-63. (Hebrew)
- McKinney, I. & Wasserman D. (1997). Suicide prevention and cultural resistance: stability in suicide ranking of European countries, 1970-1988. *Italian Journal of Suicide*, 7, 73-85.
- Meidan, Y. (2002). In praise of the outposts. *Nekuda*, 25, 54-57. (Hebrew)

- Meir, Y. & Rahav-Meir, S. (2006). Days of Disengagement: Conversations about the Israeli evacuation from the Gaza Strip. *Yediot Ahronoth*: Tel Aviv. (Hebrew)
- Minear, J.D. & Brush, L.R. (1981). The correlation of attitudes towards suicide with death anxiety, religiosity, and personal closeness to suicide. *Omega*, 11, 317-324.
- Ministry of Social Services: Official Israel Government Website.
<http://shil.haifa.ac.il/Develop/Hebrew/Family/070801.htm>. (Accessed on 3/01/03)
- Minkoff, K., Bergman, E., Beck, A.T. & Beck, R. (1973). Hopelessness, depression and attempted suicide. *American Journal of Psychiatry*, 130 (4), 455-459.
- Molock, S.D., Puri, R., Matlin, S. & Barksdale, C. (2006). Relationship between religious coping and suicidal behaviours among African American adolescents. *Journal of Black Psychology*, 32, 3 366.
- Monois, G. (1999). *History of Suicide and Voluntary Death, in Western Culture*. Baltimore: Johns Hopkins University Press.
- Murphy, E., Dingwall, R., Greatbatch, D., Parker, S. & Watson, P. (1998). Qualitative research methods in health technology assessment: a review of the literature. *Health Technology Assessment*, 2, 16 (special edition).
- Neaman, J.S. (1975). *Suggestion of the Devil: The Origins of Madness*. New York: Anchor Press/Doubleday.
- Neeleman, J. & Lewis, G. (1994). Religious identity and comfort beliefs in three groups of psychiatric patients and a group of medical controls. *International Journal of Social Psychiatry*, 40(2), 124-134.
- Neeleman, J. & Persaud, R. (1995). Why do psychiatrists neglect religion? *British Journal of Medical Psychology*, 68, 169-78.
- Neeleman, J., Halpern, D., Leon, D. & Lewis, G. (1997). Tolerance of suicide, religion and suicide rates: an ecological and individual study in nineteen Western countries. *Psychological Medicine*, 27, 1165-1171.

- Nehorai, M.T. (1996). The extreme Religious Zionists. *Meimad*, 8, 20-21. (Hebrew)
- O'Dea, J. (1977). The religious aspect: Religious Zionism today. *Forum on the Jewish People, Zionism and Israel*, 26, 39-42.
- O'Dea, J. (1978). Religious Zionism today. *Forum on the Jewish People, Zionism and Israel*, 28, 111-117.
- Orbach, I & Bar-Joseph, H. (1993). The impact of a suicide prevention programme for adolescents with suicidal tendencies and hopelessness. *Suicide and Life-Threatening Behaviour* 23, (2) 120-121.
- Pargament, K.I. (1996). Religious methods of coping: Resources for the conservation and transformation of significance. In E.P. Shafranske (ed.) *Religion and the Clinical Practice of Psychology*. Washington, DC: American Psychological Association.
- Pargament, K.I. (1997). *The Psychology of Religion and Coping*. New York: Guilford Press.
- Pargament, K.I. & Brant C.R. (1998). Religion and coping. In Koenig, H.G. (Ed.). *Handbook of Religion and Mental health*. New York: Academic Press.
- Pargament, K.I., Ensing, D.S., Falgout, K., Olsen, H., Reilly, B., Van Haitsma, K. & Warren, R. (1990). G-d help me: (I) Religious coping efforts as predictors of the outcomes to significant negative life events. *American Journal of Community Psychology*, 18, 793-823.
- Pargament, K.I., Koenig, H.G. & Perez, L. (2000). The many methods of religious coping: Initial development and validation of the RCOPE. *Journal of Clinical Psychology*, 56, 519-543.
- Patton, M.Q. (1990). *Qualitative Evaluation and Research Methods*. Newbury Park, CA: Sage Publications.
- Patton, M. (1993). *Statements in Stone: Monuments and Society in Neolithic Brittany*. London: Routledge.
- Pattison, S. (1988). *A Critique of Pastoral Care*. London: SCM.

- Payne, I.R., Bergin, A.E., Bielema, K.A. & Jenkins, P.H. (1991). Review of religion and mental health: Prevention and the enhancement of psychosocial functioning. *Prevention in Human Services*, 9, 11-40.
- Pescosolido, B.A. (1990). The social context of religious integration and suicide: pursuing the network explanation. *The Sociological Quarterly*, 31, 3, 337-357.
- Pescosolido, B.A. & Georgianna, S. (1989). Durkheim, suicide and religion: Towards a network analysis of suicide. *American Sociological Review*, 54, 33-48.
- Peterson, L.R. & Roy, A. (1985). Religiosity, anxiety, and meaning and purpose: Religion's consequences for psychological well-being. *Review of Religious Research*, 27, 49-62.
- Plante, T.G. & Sharma, N.K. (2001). Religious faith and mental health outcomes. In T.G. Plante, & A.C. Sherman, (eds.). *Faith and Health: Psychological Perspectives*. New York: Guilford.
- Pol, L.G. & Ponzurick, T.G. (1989). Gender of interviewer/gender of respondent. *Applied Market Research*, 29, 2, 9-13.
- Pollner, M. (1989). Divine relations, social relations and well-being. *Journal of Health and Social Behaviour*, 30, 92-104.
- Poloma, M.M. & Pendleton, B.F. (1991). The effects of prayer and prayer experiences on measures of general well-being. *Journal of Psychology and Theology*, 19(1), 71-83.
- Pope John Paul II, (1995). Evangelium vitae. *Origins*, 24, 689-727.
- Propst, R.L., Ostrom, R., Watkins, P., Dean, T. & Mashburn, D. (1992). Comparative efficacy of religious and nonreligious cognitive-behaviour therapy for the treatment of clinical depression in religious individuals. *Journal of Consulting and Clinical Psychology*, 60, 94-103.
- Reker, G.T. & Wong, P.T. (1988). Aging as an individual process: Toward a theory of personal meaning. In J.E. Birren & B.L. Bengston (Eds.), *Emergent Theories of Aging* (214-246) New York: Springer.

- Ringle-Hoffman, A. (1993). The religious are replacing the Kibbutznikim. *Yediot Acharanot* (27/08/93). (Hebrew)
- Ritzer, G. (1992). *Sociological Theory*, third edition. New York: McGraw-Hill.
- Roberts, D. (1953). Health from the standpoint of Christian faith. In P. Maves (ed.), *The Church and Mental Health*. New York: Charles Scribners & Sons.
- Rosner, F. (1977). *Medicine in the Bible and Talmud*. New York: Ktav.
- Rubenstein, D. (1982). *The story of Gush Emunim*. Tel Aviv: Kibbutz Hameuchad. (Hebrew)
- Ruwanpura, E., Mercer, S.W., Ager, A. & Duveen, G. (2006). Cultural and Spiritual Constructions of Mental Distress and Associated Coping Mechanisms of Tibetans in Exile: Implications for Western Interventions. *Journal of Refugee Studies*, 19,2, 187.
- Sacks, J. (1989). *Traditional alternatives: Orthodoxy and the future of the Jewish people*. London: Jews' College.
- Sadan, E. (1981). Re-establishing the Jewish state. *Nekuda*, 35, 6-11. (Hebrew)
- Samson, D. & Fishman, T. (1996). *The teachings of Harav Avraham Yitzchak HaCohen Kook, Eretz Yisrael*. Jerusalem: Torat Eretz Yisrael Publications.
- Sattler, D.N., Hamby, B.A., Winkler, J.M. & Kaiser, C. (1994). Hurricane Iniki: Psychological functioning following disaster. Paper presented at the Annual Meeting of the American Psychological Association, Los Angeles.
- Scheffer, E. (2000). The religious New-Age. *Meimad*, 19, 14-17. (Hebrew)
- Schultz-Ross, R.A. & Gutheil, T.G. (1997). Difficulties in integrating spirituality into psychotherapy. *Journal of Psychotherapy Practice and Research*, 6, 130-138.
- Schumaker, J.F. (1992). Introduction. In J.F. Schumaker (Ed.), *Religion and Mental Health*. New York: Oxford University Press.

- Schumaker, J.F. (1992). Mental health consequences of irreligion. In J.F. Schumaker (ed.), *Religion and Mental Health*. New York: Oxford University Press.
- Seiden, R.H. (1969). Suicide among youth. *Bull Suicidol (supplement)*, Dec.: 1-62.
- Seligman, M. E .P. (2003). *Authentic Happiness*. Nicholas Brealey: London.
- Shani, C. (2000). Twenty five years since the victory at Sebastia. *Nekuda*, 238, 40-53.
(Hebrew)
- Sharon, A. & Mor-Yosef, I. (1993). An interview with Rabbi Shagar. *Deot*, 3, 9-13.
(Hebrew)
- Shechter, E. (2000). *The Development of a Coherent Identity in a Conflictual Situation*.
Doctoral thesis submitted to the Hebrew University of Jerusalem. (Hebrew)
- Sheleg, Y. (2000). *The New Religious: Recent Developments among Observant Jews in Israel*. Jerusalem: Keter. (Hebrew)
- Sherlo, Y. (1997). The Torah is not a text. *Ha'aretz* (25/06/97). (Hebrew)
- Shkolnik, T., Weiner, C., Malik, L. & Festinger, Y. (2001). The effect of Jewish religiosity of elderly Israelis on their life satisfaction, health, function and activity. *Journal of Cross Cultural Gerontology*, 16(3), 201-219.
- Shumway, M. & Sentell, T.L. (2004). An examination of leading mental health journals for evidence to inform evidence-based practice. *Psychiatric Services*, 55, 649-653,
- Shush, M. (1995). Only Rabbi Rabinowitz hasn't been investigated. *Kol Ha'ir* (24/11/95).
(Hebrew)
- Silverman, D. (1989). Telling convincing stories: a plea for more cautious positivism in case studies. In B. Glassner, J.D. Moreno (eds.) *The qualitative-quantitative distinction in the social sciences*, 57-77. Dordrecht: Kluwer Academic.

- Smith, J.A. (1995). Semi structured interviewing and qualitative analysis. In J.A. Smith, R. Harre & Van L. Langenhove, (Eds.), *Rethinking methods in psychology*, 9-26. London: Sage.
- Soffer, O. & Korenstein, A. (1998). *Ethnocentricity, Citizenship, and the Rule of Law in Israel*. Tel-Aviv: The Israeli Institute for Economic and Social Research, 12. (Hebrew)
- Sorek, Y. (1998). Revolutionizing religious life. *Akdamot: A Journal of Jewish thought*, 5, 53-87. (Hebrew)
- Spilka, B. & Mullin, M. (1977). Personal religion and psychological schemata: A research approach to psychological study of religion. *Character Potential*, 8, 57-66.
- Spiro, M.E. (1965). Culturally constituted defence mechanisms. In M.E. Spiro (Ed.), *Context and meaning in cultural anthropology*. New York: Free Press.
- Stark, R. (1971). Psychopathology and religious commitment. *Review of religious research*, 12, 165-176.
- Stack, S. (1982). Suicide: a decade review of the sociological literature. *Deviant Behaviour*, 4, 41-66.
- Stack, S. (1983). A comparative analysis of suicide and religiosity. *The Journal of Social Psychology*, 119, 285-286.
- Stack, S. (1983). The effect of religious commitment on suicide: a cross-national analysis. *Journal of Health and Social Behaviour*, 24, 368-374.
- Stack, S. (1985). The effect of domestic/religious individualism on suicide, 1954-1978. *Journal of Marriage and the Family*, May, 431-447.
- Stack, S. (1991). The effect of religiosity on suicide in Sweden: a time series analysis. *Journal for the Scientific Study of Religion*, 30(4), 462-268.
- Stack, S. (1991). Religiosity, depression and suicide. In: J. Schumaker, (ed.) *Religion and Mental Health*. Oxford University Press: New York.

- Stack, S. & Lester, D. (1991). The effect of religion on suicide ideation. *Social Psychiatry and Psychiatric Epidemiology*, 26(4), 168-170.
- Stack, S. & Wasserman, I. (1992). The effect of religion on suicide ideology: An analysis of the networks perspective. *Journal for the Scientific Study of Religion*, 31, 457-466.
- Stein, D., Witzum, E. & Kaplan De-Nour, A. (1989). Adolescent attitudes towards suicide. *Israel Journal of Psychiatry and Related Sciences*, 26, 58-68.
- Stein, D., Witztum, E., Brom, D., Kaplan Denour, A. & Elizur, A. (1992). The association between adolescents' attitudes toward suicide and their psychological background and suicidal tendencies. *Adolescence*, 27 (108), 949-959.
- Stengel, E. (1975). *Suicide and Attempted Suicide*. Harmondsworth: Penguin Books.
- Stewart, S.M., Kennard, B.D., Lee, P.W.H., Mayes, T., Hughes, C. & Emslie, G. (2005). Hopelessness and suicidal ideation among adolescents in two cultures. *Journal of Child Psychology and Psychiatry*, 46,4, 364-384.
- Stillon, J.M., McDowell, E.E. & Shamblin, J.B. (1984). The suicide attitude vignette experience: a method of measuring adolescents' attitude towards suicide. *Hemisphere*, 65-79.
- Suicide Prevention Information New Zealand. Website accessed on 18/01/06
(<http://www.spinz.org.nz/page.php?p=25>)
- Sullivan, E.W. (1982). General introduction, in J. Donne, (ed.) *Biathanatos*. Newark, Del: University of Delaware Press.
- Taylor, S. J., & Bogdan, R. (1984). *Introduction to Qualitative Research methods: The Search for Meanings*. New York: John Wiley & Sons.
- Thielman, B.T. (1998). Reflections on the role of religion in the history of psychiatry. In H.G. Koenig, (Ed.). *Handbook of Religion and Mental Health*. New York: Academic Press.
- Tirosh, A. (1995). Religious edict: a boomerang. *Meimad*, 5, 6-9. (Hebrew)

- Tondo, L. & Baldessarini, R.J. (2001). *Suicide: an overview*. Medscape psychiatry clinical management modules.
<http://www.medscape.com/medscapepsychiatry/clinicalMgmt/CM.v03/pnt-CM.v03.html> (accessed on January 12th 2003).
- Tyerman, A. & Humphrey, M. (1981). Dimensions of the family environment in adolescence. *Journal of Adolescence*, 4, 353-361.
- Wasserman, I. & Stack, S. (1993). The effect of religion on suicide: an analysis of cultural context. *Omega*, 27(4), 295-305.
- Watson, P.J., Morris, R.J. & Hood, R.W., Jr. (1988a). Sin and self-functioning, Part 1: Grace, guilt, and self-consciousness. *Journal of Psychology and Theology*, 16, 254-268.
- Watson, P.J., Morris, R.J., & Hood, R.W., Jr. (1988b). Sin and self-functioning, Part 2: Grace, guilt, and psychological adjustment. *Journal of Psychology and Theology*, 16, 270-281.
- Watson, P.J., Morris, R.J., & Hood, R.W., Jr. (1988c). Sin and self-functioning, Part 3: The psychology and ideology of irrational beliefs. *Journal of Psychology and Theology*, 16, 348-361.
- Weaver, A.J., Flannelly, L.T., Garbarino, J., Figley, C.R. & Flannelly, K.J. (2003). A systematic review of research on religion and spirituality in the Journal of Traumatic Stress: 1990-1999. *Mental Health, Religion and Culture*, 6, 3, 215-228.
- Weaver, A.J., Koenig, H.G. & Ochberg, F.M. (1996). Posttraumatic stress, mental health professionals and the clergy: a need for collaboration, training and research. *Journal of Traumatic Stress*, 9(4), 861-870.
- Weinrich, S., Hardin, S.B. & Johnson, M. (1990). Nurses response to hurricane Hugo: victims' disaster stress. *Archives of Psychiatric Nursing*, 4(3), 195-205.
- Wethington, E., Brown, G. & Kessler, R. (1995). Interview measurement of stressful life events. In S. Cohen, R. Kessler & L. Underwood Gordon, (eds.), *Measuring Stress*, 59-79, New York: Oxford University Press.

- White, J.L. (1989). *The Troubled Adolescent*. New York: Pergamon Press.
- Williams, M. (1997). *Cry of Pain: Understanding Suicide and Self-Harm*. Harmondsworth: Penguin.
- Witter, R.A., Stock, W.A., Okun, M.A. & Haring, M.J. (1985). Religion and subjective well-being in adulthood: a quantitative synthesis. *Review of Religious Research*, 26, 332-342.
- Wright, R. (1985). *Sacred Rage*. New York: Linden Press/Simon & Schuster.
- Wright, S., Pratt, C. & Schmall, V. (1985). Spiritual support for caregivers of dementia patients. *Journal of Religion and Health*, 24, 31-38.
- Wulff, D.M. (1991). *Psychology of Religion: Classic and Contemporary Views*. New York: John Wiley.
- Yedidya community website, <http://yedidya.tripod.com/> (accessed on 19/12/02).
- Zung, W.W. (1974). Index of potential suicide (IPS): A rating scale for suicidal tendencies. In A.T. Beck, H.L. Resnick, & P.J. Lettieri (Eds.), *The prediction of suicide*. Bowie, MD: Charles Press.
- (No author given) (1996). *The university of York N.H.S. centre for reviews and dissemination: Information Sheets 1-7*. York: University of York N.H.S. C.R.D. centre. Chap 2)

Appendix 1

Cover page of Questionnaire Booklet including information relating to Biographical Details

Questionnaire

Before you is a series of questionnaires which deal with the ways that religious people observe the commandments and cope with life situations.

The questionnaires are totally anonymous and for the sole use of this research.

You are free to omit any question that you prefer not to answer.

We would like to thank you for your cooperation and for your honest responses.

General Biographical Details

Family Status: Single Married Divorced Widowed No. of Children _____

Year of Birth: _____

County of Birth: _____

Father's Country of Birth: _____

Mother's Country of Birth: _____

Appendix 2

Religious Belief Questionnaire

To what extent do you believe in the following ...

	Absolutely believe	Believe but occasionally have doubts	Do not know	Generally doubt but occasionally believe	Do not believe
1) in G-d?	1	2	3	4	5
2) that G-d gave Moses the <i>Torah</i> on Mt. Sinai?	1	2	3	4	5
3) in divine providence?	1	2	3	4	5
4) that G-d directs the history of the Jewish people?	1	2	3	4	5
5) that the Jews are G-d's chosen people?	1	2	3	4	5
6) in the coming of the Messiah?	1	2	3	4	5
7) that the soul continues to exist after death?	1	2	3	4	5
8) in reincarnation?	1	2	3	4	5
9) that prayer at the graveside of a righteous man has the power to help men?	1	2	3	4	5
10) that the blessing of a Rabbi or a righteous person can help a sick or needy person?	1	2	3	4	5

	Religion plays an integral role	Religion plays a central role	Religion plays a certain role	Religion plays a minor role	Religion plays no role
11) What role does religion play in your everyday life?	1	2	3	4	5

Appendix 3

Religious Behaviour Questionnaire

Do you keep the following *Mitzvot* whilst on vacation from your studies?

	Keep Fully	Keep Partially	Do not keep
1) Fasting on the 9 th of Av	1	2	3
2) Washing hands before eating bread	1	2	3
3) Grace after meals	1	2	3
4) Blessings before food	1	2	3
5) Saying <i>Shema</i> before going to sleep	1	2	3
6) Eating only fruits which are permitted according to the laws of <i>Orlah</i>	1	2	3
7) Studying <i>Torah</i>	1	2	3
8) Fasting on the 17 th of <i>Tammuz</i>	1	2	3

How particular are you about not doing the following activities?

	I never perform this activity	Occasionally I perform this activity	I regularly perform this activity
9) Travelling on <i>Shabbat</i>	1	2	3
10) Turning on the radio or television on <i>Shabbat</i>	1	2	3
11) Turning on electrical appliances on the festivals	1	2	3
12) Eating in a public place which is not under Rabbinic culinary supervision	1	2	3
13) Mixed swimming	1	2	3
14) Going to the cinema during the week of the 9 th of Av	1	2	3
15) Watching television during the week of the 9 th of Av	1	2	3
16) Going to see a professional football match on <i>Shabbat</i>	1	2	3

17) With what frequency do you watch television?

1. Never
2. Occasionally
3. Often

Do you read the following newspapers?

	Never	Occasionally	Often
18) <i>Ma'ariv/Yediot</i>	1	2	3
19) <i>Ha'Aretz</i>	1	2	3
20) <i>Hatzofeh/ Makor Rishon</i>	1	2	3
21) <i>Yeted Ne'eman / HaModia / Yom HaShishi</i>	1	2	3

Whilst on vacation from your studies, do you pray the following services with a *Minyan* (congregation)?

	I pray with a <i>Minyan</i>	I sometimes pray by myself and sometimes with a <i>Minyan</i>	I pray by myself	I don't usually pray this service either by myself or with a <i>Minyan</i>
22) Weekday morning service	1	2	3	4
23) Weekday afternoon and evening services	1	2	3	4
24) Friday evening, <i>Erev Shabbat</i> , service	1	2	3	4
25) Morning and additional <i>Shabbat</i> services	1	2	3	4
26) Afternoon and evening services on <i>Shabbat</i>	1	2	3	4
27) Morning and additional services on festivals	1	2	3	4
28) Morning and additional services on <i>Rosh Chodesh</i> (beginning of the month)	1	2	3	4
29) Morning service on fast days	1	2	3	4
30) <i>Selichot</i> (repentance prayers) before <i>Rosh Hashana</i> and <i>Yom Kippur</i>	1	2	3	4

For Males Only

31) If you usually wear a *Kippa Sruga*, how big is it?

1. very large
2. large
3. medium
4. small

32) Whilst on vacation from your studies, how particular are you about laying *Tephillin*?

1. I lay 2 sets of *Tephillin* every day.
2. I lay one pair of *Tephillin* every day.
3. I usually lay *Tephillin* every day but occasionally I miss a day.
4. I am not particular about laying *Tephillin*.
5. I never lay *Tephillin*.

33) How do you wear *Tzitziot* (fringes worn on a four cornered garment)?

1. Over clothes
2. Shirt tucked in but with *Tzitziot* un-tucked
3. Both shirt and *Tzitziot* not tucked in
4. Under clothes
5. I generally don't wear *Tzitziot*

34) What size of *Tzitziot* do you wear?

1. Chazon Ish (size 9)
2. Normal
3. Don't know

Whilst on vacation from your studies, where and when do you usually wear *Tzitziot*?

	Always	Usually	Occasionally	Never
35) At the Synagogue	1	2	3	4
36) At home	1	2	3	4
37) Whilst doing sport	1	2	3	4
38) On weekdays (during the day)	1	2	3	4
39) On weekdays (in the evenings)	1	2	3	4
40) On <i>Shabbat</i>	1	2	3	4
41) Whilst going on hikes	1	2	3	4

Do you shave your beard during the following periods in the year?

	Yes	No
42) During the <i>Omer</i> period	1	2
43) On <i>Chol HaMoed</i>	1	2
44) During the week of the 9 th of <i>Av</i>	1	2
45) During the <i>Three Weeks</i>	1	2

46) If you shave what type of shaver/razor do you use?

1. Electric shaver
2. Shaving cream
3. Razor
4. I don't shave

47) Do you have *Pe'ot* (side locks)?

1. Yes
2. No

For Females only

People often decide what to wear according to where they are going and hence will not always dress in the same way. How do you dress in the following places?

1. Always
2. Sometimes
3. Never

	At Home	General going out	Whilst hiking	On special occasions (weddings, Barmitzvahs)	At the Synagogue
48) Long Trousers					
49) Shorts					
50) Long trousers covered with a skirt					
51) Sleeveless dress/top (in the summer)					
52) Short sleeved dress/top (in the summer)					
53) A dress/top with sleeves that go up to the elbow or beyond (in the summer)					
54) Long socks or tights (in the summer)					

Appendix 4

Religious Motivation Questionnaire

In previous research we determined a list of reasons or motivations for observing *Mitzvot* and activities which are associated with Jewish tradition. Now, we would like you to indicate to what extent each of the following motivations or reasons are important to you.

Please indicate the importance of each motivation according to the following scale.

1	2	3	4	5
Irrelevant	Not important	Slightly important and slightly not important	Important	Very important

	Motivation for observing the Mitzvah	Irrelevant	Not important	Slightly important and slightly not important	Important	Very important
1	It is decreed in the <i>Torah</i>	1	2	3	4	5
2	It gives me a feeling of immortality	1	2	3	4	5
3	It allows me to be more spiritual	1	2	3	4	5
4	Because I believe	1	2	3	4	5
5	In order to be with my family	1	2	3	4	5
6	It shows my children their roots	1	2	3	4	5
7	It provides absolution for transgressions	1	2	3	4	5
8	It creates a bond with G-d	1	2	3	4	5
9	Because it is important how people perceive me	1	2	3	4	5
10	Because it is important	1	2	3	4	5
11	I'm afraid of doing a transgression	1	2	3	4	5
12	It's because of Jewish pride	1	2	3	4	5
13	To give significance to the festivals	1	2	3	4	5
14	I've done it ever since I was a child	1	2	3	4	5
15	Because of family tradition	1	2	3	4	5
16	To emphasis my connection with the Jewish tradition	1	2	3	4	5
17	It builds up your personality	1	2	3	4	5
18	It's symbolic of my religion	1	2	3	4	5
19	For reasons of tradition	1	2	3	4	5
20	To be like everyone else	1	2	3	4	5
21	It makes me feel connected to the Jewish people	1	2	3	4	5
22	To be part of something much bigger	1	2	3	4	5

	Motivation for observing the Mitzvah	Irrelevant	Not Important	Slightly important and slightly not important	important	Very important
23	To develop in terms of “putting off satisfaction”	1	2	3	4	5
24	It is natural	1	2	3	4	5
25	To avoid a feeling that I have let myself down	1	2	3	4	5
26	It helps me cope with life	1	2	3	4	5
27	Its expresses my bond with my religion	1	2	3	4	5
28	It saves you from death	1	2	3	4	5
29	To create a Jewish atmosphere	1	2	3	4	5
30	It gives you a good feeling about life	1	2	3	4	5
31	It makes me think before I act	1	2	3	4	5
32	It gives me a spiritual high	1	2	3	4	5
33	To receive peoples’ respect and admiration	1	2	3	4	5
34	Because everybody else does it	1	2	3	4	5
35	It creates a feeling of national unity	1	2	3	4	5
36	It gives you something to cling to	1	2	3	4	5
37	It makes you into a better person	1	2	3	4	5
38	It unifies the family	1	2	3	4	5
39	In order not to break down the tradition	1	2	3	4	5
40	It gives me a feeling of security	1	2	3	4	5
41	It perpetuates values which I received from home	1	2	3	4	5
42	It gives me the feeling that I have done something good	1	2	3	4	5
43	It creates a family get-together	1	2	3	4	5
44	Out of respect for my neighbours	1	2	3	4	5
45	It makes me feel connected to a community	1	2	3	4	5
46	So that the children will know how to behave in the future	1	2	3	4	5
47	In order not to do something bad	1	2	3	4	5
48	In order not to endanger the Jewish people	1	2	3	4	5
49	To do the right thing	1	2	3	4	5
50	That is how I was brought up	1	2	3	4	5
51	To feeling part of a community	1	2	3	4	5
52	It gives a feeling of purity	1	2	3	4	5
53	In order to feel a specific festival	1	2	3	4	5
54	In order to meet people	1	2	3	4	5
55	To earn my place in the world to come	1	2	3	4	5
56	To give respect to those around me	1	2	3	4	5
57	It gives the family time to be together	1	2	3	4	5
58	Because I am part of the Jewish people	1	2	3	4	5

Appendix 5

Suicide Ideation Questionnaire (Self-Assessment Questionnaire)

Before you is a list of statements which you are requested to rate according to the five columns provided. Some of the statements relate to how you feel and some relate to how you see yourself. Try and answer accurately. Please rate the statements according to the following scale and circle the most appropriate number.

Never	Occasionally	Quite often	Frequently	Most or all of the time
1	2	3	4	5

	Never	Occasionally	Quite often	Frequently	Most or all of the time
1. I feel that in time things are going to get better	1	2	3	4	5
2. I cry or feel like crying	1	2	3	4	5
3. I feel hopeful about the future	1	2	3	4	5
4. I am more irritable than usual	1	2	3	4	5
5. I feel that I am useful and needed	1	2	3	4	5
6. I find it easy to make decisions	1	2	3	4	5
7. My life is pretty full	1	2	3	4	5
8. I still enjoy the things that I used to enjoy	1	2	3	4	5
9. I feel more anxious than usual	1	2	3	4	5
10. I have guilty feelings about my past	1	2	3	4	5
11. I get upset easily or feel panicky	1	2	3	4	5
12. I feel that I am falling apart and going to pieces	1	2	3	4	5
13. I feel that everything is alright and nothing bad will happen	1	2	3	4	5
14. I feel that I deserved to be punished	1	2	3	4	5
15. I feel down-hearted and blue	1	2	3	4	5
16. I feel afraid for no reason at all	1	2	3	4	5
17. When things seem to be at the end I feel that there is someone that I can turn to	1	2	3	4	5
18. I have fits of anger and lose my temper	1	2	3	4	5
19. I feel that there is no way out of my situation	1	2	3	4	5
20. I feel that there is someone who depends upon me	1	2	3	4	5
21. How often do you think that other people think about suicide?	1	2	3	4	5
22. How often do people who think about suicide actually kill themselves?	1	2	3	4	5
23. Recently I've had thoughts about dying	1	2	3	4	5
24. Recently, I've been thinking of ways to kill myself	1	2	3	4	5

25. Recently I have been eating the same amount that I used to eat in the past	No				Yes
26. Recently I feel that my mind is as clear as it used to be in the past	No				Yes

27. I've said to someone that I wanted to kill myself	Never	Once	Twice	Three times	More than three times
28. I have attempted to kill myself	Never	Once	Twice	Three times	More than three times
29. Have you known anybody who has committed suicide?	No				Yes

Appendix 6

Attitude to Suicide Questionnaire

Do you think that **you** would have the **right** to commit suicide if ...

		I would have the absolute right	Generally I would have the right	Sometimes I would have right	I would never have the right
1	you were suffering from an incurable disease?	1	2	3	4
2	you were suffering from severe and chronic pain?	1	2	3	4
3	you were to become a serious invalid?	1	2	3	4
4	you were responsible for the death of another person?	1	2	3	4
5	the person most near and dear to you were to die?	1	2	3	4
6	your partner was to leave you?	1	2	3	4
7	you were to be made unemployed?	1	2	3	4
8	you were to be in serious financial debt?	1	2	3	4
9	you were never to find a marriage partner	1	2	3	4
10	you found out that you could never have children?	1	2	3	4

Does **people** have the **right** to commit suicide if ...

		They have the absolute right	Generally they have the right	Sometimes they have the right	They never have the right
11	they are suffering from an incurable disease?	1	2	3	4
12	they are suffering from severe and chronic pain?	1	2	3	4
13	they have become a serious invalid?	1	2	3	4
14	they were responsible for the death of another person?	1	2	3	4
15	the person most near and dear to them has passed away?	1	2	3	4
16	their partner has left them?	1	2	3	4
17	they have been made unemployed?	1	2	3	4
18	they are in serious financial debt?	1	2	3	4
19	they were never able to find a marriage partner?	1	2	3	4
20	they found out that they could never have children?	1	2	3	4

If the person most near and dear to you were to commit suicide in the following circumstances, how would you feel about it?

		It would be the worst thing that could happen to me	It would be one of the worst thing that could happen to me	I would be very upset	It's complicated, I don't really know how I would feel
21	Whilst suffering from an incurable disease	1	2	3	4
22	Whilst suffering from serious and chronic pain	1	2	3	4
23	After becoming a serious invalid	1	2	3	4
24	After being responsible for the death of another person	1	2	3	4
25	After being made unemployed	1	2	3	4
26	After falling into serious financial debt	1	2	3	4
27	After realizing that they would never find a marriage partner	1	2	3	4
28	After finding out that they couldn't have children	1	2	3	4

How probable would it be for the person most near and dear to you to commit suicide if ...

		Very Probable	Quite probable	Improbable	Very improbable
29	they were suffering from an incurable disease?	1	2	3	4
30	they were suffering from serious and chronic pain?	1	2	3	4
31	they were to become a serious invalid?	1	2	3	4
32	they were responsible for the death of another person?	1	2	3	4
33	they were to be made unemployed?	1	2	3	4
34	they were to find themselves in serious financial debt?	1	2	3	4
35	they were never able to find a marriage partner?	1	2	3	4
36	they were to find out that they couldn't have children?	1	2	3	4

How probable is it for **someone** to commit suicide if ...

		Very Probable	Quite probable	Improbable	Very improbable
37	he/she is suffering from an incurable disease?	1	2	3	4
38	he/she is suffering from serious and chronic pain?	1	2	3	4
39	he/she has become a serious invalid?	1	2	3	4
40	he/she is responsible for the death of another person?	1	2	3	4
41	the person most near and dear to them has died?	1	2	3	4
42	their partner has left them?	1	2	3	4
43	he/she has been made redundant?	1	2	3	4
44	he/she is in serious financial debt?	1	2	3	4
45	he/she has never been able to find a marriage partner?	1	2	3	4
46	he/she has found out that they couldn't have children?	1	2	3	4

Appendix 7

Religious Coping Questionnaire

There are many ways to deal with problems. These items ask what you did in order to cope with negative events. Each item says something about a particular way of coping. We want to know to what extent you did what the item says. *How much or how frequently*. Don't answer on the basis of what worked or not - just whether or not you did it.

Use these response choices. Try to rate each item separately in your mind from the others. Make your answers as true FOR YOU as you can. Circle the answer that best applies to you.

- 1- Not at all
- 2- Somewhat
- 3- Quite a bit
- 4- A great deal

1	Pleaded with G-d to make everything work out.	1	2	3	4
2	Tried to deal with the situation on my own without G-d's help.	1	2	3	4
3	Worked together with G-d to relieve my worries.	1	2	3	4
4	Wondered whether G-d was punishing me because of my lack of faith.	1	2	3	4
5	Felt that even G-d has limits.	1	2	3	4
6	Didn't try much of anything, simply expected G-d to take control.	1	2	3	4
7	Knew that I couldn't handle the situation, so I just expected G-d to handle it for me.	1	2	3	4
8	Prayed for a miracle.	1	2	3	4
9	Worked together with G-d in a partnership.	1	2	3	4
10	Saw my situation as being part of G-d's plan.	1	2	3	4
11	Decided that G-d was punishing me for my sins.	1	2	3	4
12	Questioned the power of G-d.	1	2	3	4
13	Prayed to get my mind off my problems.	1	2	3	4
14	Tried to get my mind off my problems by focusing on G-d.	1	2	3	4
15	Tried to deal with my feelings without G-d's help.	1	2	3	4
16	Did my best and then turned the situation over to G-d.	1	2	3	4
17	Believed that the devil was responsible for my situation.	1	2	3	4
18	Tried to make sense of the situation with G-d.	1	2	3	4
19	Sought comfort from G-d.	1	2	3	4
20	Trusted that G-d would be by my side.	1	2	3	4
21	Did what I could and put the rest in G-d's hands.	1	2	3	4
22	Felt that the situation was the work of the devil.	1	2	3	4
23	Went to Synagogue to stop thinking about the situation.	1	2	3	4
24	Made a deal with G-d so that He would make things better.	1	2	3	4

25	Realized that there were some things that even G-d could not change.	1	2	3	4
26	Made decisions about what to do without G-d's help.	1	2	3	4
27	Depended on my own strength without support from G-d.	1	2	3	4
28	Didn't do much, just expected G-d to solve my problem for me.	1	2	3	4
29	Tried to see how the situation could be beneficial spiritually.	1	2	3	4
30	Felt that the devil was trying to turn me away from G-d.	1	2	3	4
31	Didn't try to cope, only expected G-d to take my worries away.	1	2	3	4
32	Thought about spiritual matters to stop thinking about my problems.	1	2	3	4
33	Realized that G-d cannot answer all of my prayers.	1	2	3	4
34	Tried to make sense of the situation without relying on G-d.	1	2	3	4
35	Looked to G-d for strength, support and guidance.	1	2	3	4
36	Thought that the event might bring me closer to G-d.	1	2	3	4
37	Tried to find a lesson from G-d in the event.	1	2	3	4
38	Thought that some things are beyond G-d's control.	1	2	3	4
39	Took control over what I could and gave the rest up G-d.	1	2	3	4
40	Tried to see how G-d might be trying to strengthen me in this situation.	1	2	3	4
41	Wondered what I had done for G-d to punish me.	1	2	3	4
42	Wondered if the devil had anything to do with this situation.	1	2	3	4
43	Asked G-d to help me be more forgiving.	1	2	3	4
44	Wondered whether G-d had abandoned me.	1	2	3	4
45	Hoped for a spiritual rebirth.	1	2	3	4
46	Confessed my sins.	1	2	3	4
47	Felt my community seemed to be rejecting or ignoring me.	1	2	3	4
48	Offered spiritual support to family and friends.	1	2	3	4
49	Felt angry that G-d was not there for me.	1	2	3	4
50	Prayed for a complete transformation of my life.	1	2	3	4
51	Prayed to discover my purpose in living.	1	2	3	4
52	Stayed away from false religious teachings.	1	2	3	4
53	Tried to be less sinful.	1	2	3	4
54	Stuck to the teachings and practices of my religion.	1	2	3	4
55	Asked Rabbis to remember me in their prayers.	1	2	3	4
56	Asked others to pray for me.	1	2	3	4
57	Sought help from G-d in letting go of my anger.	1	2	3	4
58	Thought about how my life is part of a larger spiritual force.	1	2	3	4
59	Asked forgiveness for my sins.	1	2	3	4
60	Tried to change my whole way of life and to follow a new path – G-d's path.	1	2	3	4
61	Wondered whether my Rabbi was really there for me.	1	2	3	4
62	Tried to give spiritual strength to others.	1	2	3	4
63	Wondered whether my community had abandoned me.	1	2	3	4
64	Questioned G-d's love for me.	1	2	3	4
65	Sought a stronger spiritual connection with other people.	1	2	3	4
66	Sought spiritual help to give up my resentments.	1	2	3	4
67	Asked G-d to help me find a new purpose in life.	1	2	3	4
68	Sought G-d's help in trying to forgive others.	1	2	3	4
69	Avoided people who weren't of my faith.	1	2	3	4

70	Tried to experience a stronger feeling of spirituality.	1	2	3	4
71	Prayed for the well-being of others.	1	2	3	4
72	Prayed to find a reason to live.	1	2	3	4
73	Looked for love and concern from the members of my community.	1	2	3	4
74	Ignored advice that was inconsistent with my faith.	1	2	3	4
75	Tried to build a strong relationship with a higher power.	1	2	3	4
76	Asked G-d to help me be less sinful.	1	2	3	4
77	Voiced anger that G-d didn't answer my prayers.	1	2	3	4
78	Asked G-d to help me overcome my bitterness.	1	2	3	4
79	Looked for spiritual support from Rabbis.	1	2	3	4
80	Looked to G-d for a new direction in life.	1	2	3	4
81	Disagreed with what Judaism wanted me to do or believe.	1	2	3	4
82	Tried to comfort others through prayer.	1	2	3	4
83	Felt dissatisfaction with the Rabbis.	1	2	3	4
84	Sought new purpose in life from G-d.	1	2	3	4
85	Sought support from members of my Synagogue.	1	2	3	4

Appendix 8

Additional Questions regarding Religious History and Development

Please write down in a few sentences your present and past religious status. Were you born into a religious family? Have you or your family ever gone through a process of *Chazara BeTeShuva* (transformation from being irreligious to being observant)? Have you at any time gone through a process of becoming significantly more or less observant?
